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  * * * * * * * * * * * * * STN  Columbus  * * * * * * * * * * * * * * *

FILE 'HOME' ENTERED AT 16:51:04 ON 14 NOV 2001

=> fil reg; s polyethylene glycol/cn

L1            1 POLYETHYLENE GLYCOL/CN

=> d

L1   ANSWER 1 OF 1  REGISTRY  COPYRIGHT 2001 ACS
RN   25322-68-3  REGISTRY
CN   Poly(oxy-1,2-ethanediyl), .alpha.-hydro-.omega.-hydroxy- (9CI)  (CA INDEX
     NAME)
OTHER NAMES:
CN   .alpha.,.omega.-Hydroxypoly(ethylene oxide)
CN   .alpha.-Hydro-.omega.-hydroxypoly(oxy-1,2-ethanediyl)
CN   .alpha.-Hydro-.omega.-hydroxypoly(oxyethylene)
CN   1,2-Ethanediol, homopolymer
CN   1660O
CN   1660S
CN   Alkox
CN   Alkox E 100
CN   Alkox E 130
CN   Alkox E 160
CN   Alkox E 240
CN   Alkox E 30
CN   Alkox E 45
CN   Alkox E 60
CN   Alkox E 75
CN   Alkox R 1000
CN   Alkox R 15
CN   Alkox R 150
CN   Alkox R 400
CN   Alkox SR
CN   Antarox E 4000
CN   Aquacide III
CN   Aquaffin
CN   Badimol
CN   BDH 301
CN   Bradsyn PEG
CN   Breox 2000
CN   Breox 20M
CN   Breox 4000
CN   Breox 550
CN   Breox PEG 300
CN   CAFO 154
CN   Carbowax
CN   Carbowax 100
CN   Carbowax 1000
CN   Carbowax 1350
CN   Carbowax 14000
CN   Carbowax 1500
CN   Carbowax 1540
CN   Carbowax 20
CN   Carbowax 200
CN   Carbowax 20000
CN   Carbowax 25000
CN   Carbowax 300
CN   Carbowax 3350
CN   Carbowax 400
CN   Carbowax 4000
CN   Carbowax 4500
CN   Carbowax 4600
CN   Carbowax 600
CN   Polyethylene glycol
ADDITIONAL NAMES NOT AVAILABLE IN THIS FORMAT - Use FCN, FIDE, or ALL for
     DISPLAY
AR   9002-90-8
DR   12676-74-3, 12770-93-3, 9081-95-2, 9085-02-3, 9085-03-4, 54510-95-1,
     125223-68-9, 54847-64-2, 59763-40-5, 64441-68-5, 64640-28-4, 133573-31-6,
     25104-58-9, 25609-81-8, 134919-43-0, 101677-86-5, 99264-61-6, 106186-24-7,
     112895-21-3, 114323-93-2, 50809-04-6, 50809-59-1, 119219-06-6, 60894-12-4,
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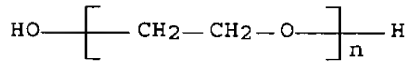
61840-14-0, 37361-15-2, 112384-37-9, 70926-57-7, 75285-02-8, 75285-03-9,
77986-38-0, 150872-82-5, 154394-38-4, 79964-26-4, 80341-53-3, 85399-22-0,
85945-29-5, 88747-22-2, 34802-42-1, 107502-63-6, 107529-96-4, 116549-90-7,
156948-19-5, 169046-53-1, 188924-03-0, 189154-62-9, 191743-71-2,
201163-43-1, 206357-86-0, 221638-71-7, 225502-44-3, 270910-26-4,
307928-07-0, 356055-70-4
MF (C2 H4 O)n H2 O
CI PMS, COM
PCT Polyether
LC STN Files: ADISNEWS, AGRICOLA, ANABSTR, BIOBUSINESS, BIOSIS, BIOTECHNO,
CA, CABA, CANCERLIT, CAPLUS, CASREACT, CBNB, CEN, CHEMCATS,
CHEMINFORMRX, CHEMLIST, CHEMSAFE, CIN, CSCHEM, CSNB, DDFU, DETHERM*,
DIOGENES, DRUGU, EMBASE, ENCOMPLIT, ENCOMPLIT2, ENCOMPPAT, ENCOMPPAT2,
HSDB*, IFICDB, IFIPAT, IFIUDB, IPA, MEDLINE, MRCK*, MSDS-OHS, NIOSHTIC,
PDLCOM*, PIRA, PROMT, RTECS*, SPECINFO, TOXLIT, TULSA, ULIDAT, USAN,
USPATFULL, VETU, VTB
(*File contains numerically searchable property data)
Other Sources: DSL**, TSCA**, WHO
(**Enter CHEMLIST File for up-to-date regulatory information)



58986 REFERENCES IN FILE CA (1967 TO DATE)
15908 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
59106 REFERENCES IN FILE CAPLUS (1967 TO DATE)

=> sel name l1 1
E1 THROUGH E353 ASSIGNED

=> fil hcapl
=> s l1 or e1-50
L2 60890 L1 OR (".ALPHA.-HYDRO-.OMEGA.-HYDROXYPOLY(OXY-1,2-ETHANEDIYL)"/B
I OR ".ALPHA.-HYDRO-.OMEGA.-HYDROXYPOLY(OXYETHYLENE)"/BI OR
".ALPHA.,.OMEGA.-HYDROXYPOLY(ETHYLENE OXIDE)"/BI OR "ALKOX E
100"/BI OR "ALKOX E 130"/BI OR "ALKOX E 160"/BI OR "ALKOX E
240"/BI OR "ALKOX E 30"/BI OR "ALKOX E 45"/BI OR "ALKOX E 60"/BI
OR "ALKOX E 75"/BI OR "ALKOX R 1000"/BI OR "ALKOX R 15"/BI OR
"ALKOX R 150"/BI OR "ALKOX R 400"/BI OR "ALKOX SR"/BI OR ALKOX/B
I OR "ANTAROX E 4000"/BI OR "AQUACIDE III"/BI OR AQUAFFIN/BI OR
BADIMOL/BI OR "BDH 301"/BI OR "BRADSYN PEG"/BI OR "BREOX PEG
300"/BI OR "BREOX 20M"/BI OR "BREOX 2000"/BI OR "BREOX 4000"/BI
OR "BREOX 550"/BI OR "CAFO 154"/BI OR "CARBOWAX E 9000"/BI OR
"CARBOWAX PEG 300"/BI OR "CARBOWAX 100"/BI OR "CARBOWAX 1000"/BI
OR "CARBOWAX 1350"/BI OR "CARBOWAX 14000"/BI OR "CARBOWAX 1500"
/BI OR "CARBOWAX 1540"/BI OR "CARBOWAX 20"/BI OR "CARBOWAX 200"/
BI OR "CARBOWAX 20000"/BI OR "CARBOWAX 25000"/BI OR "CARBOWAX
300"/BI OR "CARBOWAX 3350"/BI OR "CARBOWAX 400"/

=> s e51-150
L3 16412 (CARBOWAX/BI OR "CARTARETIN E"/BI OR "CBP 20"/BI OR "CERASOL
250A"/BI OR "CHEMIOX E 20(C)"/BI OR DB-WAX/BI OR "DD 3002"/BI
OR "DEACTIVATOR H"/BI OR "DECUFLUX RM 33"/BI OR "DESMOPHEN L
1208"/BI OR "E 1000 (POLYGLYCOL)"/BI OR "E 1000"/BI OR "E 1450NF
"/BI OR "E 200 (POLYGLYCOL)"/BI OR "E 200"/BI OR "E 240"/BI OR
"E 30"/BI OR "E 3350"/BI OR "E 400"/BI OR "E 400NF"/BI OR "E
4500 (POLYMER)"/BI OR "E 4500"/BI OR "E 600"/BI OR "E 6000"/BI
OR "E 8000"/BI OR "EMKAPOL 150"/BI OR "EMKAPOL 200"/BI OR "EMKAP
OL 4200"/BI OR "ENT 1000"/BI OR "ETHYLENE GLYCOL HOMOPOLYMER"/BI
OR "ETHYLENE GLYCOL POLYMER"/BI OR "ETHYLENE OXIDE POLYMER"/BI
OR "ETHYLENE OXIDE, HOMOPOLYMER"/BI OR "ETHYLENE POLYOXIDE"/BI
OR "FELTMASTER 15LF"/BI OR "FLOC 999"/BI OR "FOMREZ PEG 1000L"/B
I OR FORLAX/BI OR FPR/BI OR "G 3350"/BI OR "GAFANOL E 200"/BI
OR "GAFANOL E 300"/BI OR "GENOPLAST 200"/BI OR "GLIGOGUM 4000"/B
I OR "GPE 1000"/BI OR "GPE 400"/BI OR "GR 4110G"/BI OR "HM 500"/
BI OR "IW (DISPERSANT)"/BI OR IW/BI OR KLEANP

=> s e151-343

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L4        96292 ("PE 2"/BI OR "PE 400"/BI OR "PE 4000"/BI OR "PE 68 (POLYOL)"/BI
                 OR "PE 68"/BI OR "PEG (POLYGLYCOL)"/BI OR "PEG 100"/BI OR "PEG
                1000"/BI OR "PEG 10000"/BI OR "PEG 11000"/BI OR "PEG 115"/BI OR
                "PEG 12000"/BI OR "PEG 1450"/BI OR "PEG 1500"/BI OR "PEG 15000"/
                BI OR "PEG 2M"/BI OR "PEG 200"/BI OR "PEG 2000"/BI OR "PEG 20000
                "/BI OR "PEG 300"/BI OR "PEG 3350"/BI OR "PEG 35"/BI OR "PEG
                4"/BI OR "PEG 400"/BI OR "PEG 4000"/BI OR "PEG 4000N"/BI OR
                "PEG 4600"/BI OR "PEG 5000"/BI OR "PEG 6"/BI OR "PEG 600"/BI OR
                "PEG 6000"/BI OR "PEG 6000P"/BI OR "PEG 6000S"/BI OR "PEG 7M"/BI
                 OR "PEG 75"/BI OR "PEG 8000"/BI OR PEG/BI OR "PEGOL 300"/BI OR
                "PEO 1"/BI OR "PEO 10"/BI OR "PEO 100"/BI OR "PEO 15"/BI OR
                "PEO 16"/BI OR "PEO 18"/BI OR "PEO 27"/BI OR "PEO 3"/BI OR "PEO
                400"/BI OR "PEO 5000"/BI OR "PEO 750N"/BI OR "PEO 8"/BI OR PEO/B
                I OR PEOPO-A/BI OR "PLASTIGEN PR 8086"/BI OR "PLURACOL E 300"/BI
                 OR "PLURACOL E 400"/BI OR "PLURACOL E 4000"/BI OR "PLURACOL E
                4600"/BI OR "PLURACOL E 600"/BI OR "PLURA

=> s l2 or l3 or l4
L5       126983 L2 OR L3 OR L4

=> s ?spin? or epidur? or intrathecal
         504451 ?SPIN?
           1724 EPIDUR?
           3958 INTRATHECAL
L6       506442 ?SPIN? OR EPIDUR? OR INTRATHECAL

=> s l5 (s) l6
L7         1376 L5 (S) L6

=> s spinal cord injur?
          42975 SPINAL
             13 SPINALS
          42986 SPINAL
                  (SPINAL OR SPINALS)
          47677 CORD
           8486 CORDS
          50084 CORD
                  (CORD OR CORDS)
          93752 INJUR?
L8         1703 SPINAL CORD INJUR?
                  (SPINAL(W)CORD(W)INJUR?)

=> s l7 (s) l8
L9            4 L7 (S) L8

=> d tot

L9   ANSWER 1 OF 4  HCAPLUS  COPYRIGHT 2001 ACS
AN   2001:459556  HCAPLUS
TI   Pegylated Brain-Derived Neurotrophic Factor Shows Improved Distribution
     into the Spinal Cord and Stimulates Locomotor Activity and Morphological
     Changes after Injury
AU   Ankeny, Daniel P.; McTigue, Dana M.; Guan, Zhen; Yan, Qiao; Kinstler,
     Olaf; Stokes, Bradford T.; Jakeman, Lyn B.
CS   Department of Physiology and Cell Biology, The Ohio State University,
     Columbus, OH, 43210, USA
SO   Exp. Neurol. (2001), 170(1), 85-100
     CODEN: EXNEAC; ISSN: 0014-4886
PB   Academic Press
DT   Journal
LA   English
RE.CNT  79
RE
(1) Altar, C; Exp Neurol, 10.1006/exnr.1994.1182 1994, V130, P31 HCAPLUS
(2) Anderson, K; J Comp Neurol 1995, V357, P296 HCAPLUS
(5) Beck, T; J Cereb Blood Flow Metab 1994, V14, P689 HCAPLUS
(7) Belcheva, N; Bioconjug Chem 1999, V10, P932 HCAPLUS
(8) Binder, D; Trends Neurosci 2001, V24, P47 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L9   ANSWER 2 OF 4  HCAPLUS  COPYRIGHT 2001 ACS
AN   2000:177753  HCAPLUS
TI   Functional recovery of paraplegic rats and motor axon regeneration in
```

their spinal cords by olfactory ensheathing glia
AU Ramon-Cueto, Almudena; Cordero, M. Isabel; Santos-Benito, Fernando F.; Avila, Jesus
CS Centro de Biologia Molecular "Severo Ochoa" (CSIC-UAM) Facultad de Ciencias Universidad Autonoma de Madrid, Madrid, 28049, Spain
SO Neuron (2000), 25(2), 425-435
CODEN: NERNET; ISSN: 0896-6273
PB Cell Press
DT Journal
LA English
RE.CNT 56
RE
(5) Bovolenta, P; Prog Brain Res 1992, V94, P367 HCAPLUS
(6) Bregman, B; Curr Opin Neurobiol 1998, V8, P800 HCAPLUS
(7) Bregman, B; Exp Neurol 1998, V149, P13 HCAPLUS
(8) Bregman, B; Nature 1995, V378, P498 HCAPLUS
(9) Cassam, A; Neuroscience 1999, V88, P1275 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L9 ANSWER 3 OF 4 HCAPLUS COPYRIGHT 2001 ACS
AN 2000:51638 HCAPLUS
DN 132:203028
TI Immediate recovery from **spinal cord injury** through molecular repair of nerve membranes with **polyethylene glycol**
AU Borgens, Richard B.; Shi, Riyi
CS Center for Paralysis Research, Department of Basic Medical Sciences, School of Veterinary Medicine, Purdue University, West Lafayette, IN, 47907, USA
SO FASEB J. (2000), 14(1), 27-35
CODEN: FAJOEC; ISSN: 0892-6638
PB Federation of American Societies for Experimental Biology
DT Journal
LA English
RE.CNT 39
RE
(1) Ahkong, Q; J Cell Sci 1987, V88, P389 HCAPLUS
(15) Davidson, R; Somat Cell Genet 1976, V2, P271 HCAPLUS
(18) Hannig, J; Int J Radiat Biol 1999, V75, P379 HCAPLUS
(20) Lee, J; Biochemistry 1997, V36, P6251 HCAPLUS
(22) Lee, R; Proc Natl Acad Sci USA 1992, V89, P4524 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L9 ANSWER 4 OF 4 HCAPLUS COPYRIGHT 2001 ACS
AN 1999:376637 HCAPLUS
DN 131:179700
TI Acute repair of crushed guinea pig spinal cord by polyethylene glycol
AU Shi, Riyi; Borgens, Richard B.
CS Center for Paralysis Research, Department of Basic Medical Sciences, Purdue University, West Lafayette, IN, 47907, USA
SO J. Neurophysiol. (1999), 81(5), 2406-2414
CODEN: JONEA4; ISSN: 0022-3077
PB American Physiological Society
DT Journal
LA English
RE.CNT 30
RE
(1) Ahkong, Q; J Cell Sci 1987, V88, P389 HCAPLUS
(3) Bittner, G; Brain Res 1986, V367, P351 HCAPLUS
(5) Blight, A; Brain Res Bull 1989, V22, P47 HCAPLUS
(8) Borgens, R; Proc Natl Acad Sci USA 1980, V77, P1209 HCAPLUS
(9) Davidson, R; Somat Cell Genet 1976, V2, P271 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

=> s spinal cord
42975 SPINAL
13 SPINALS
42986 SPINAL
(SPINAL OR SPINALS)
47677 CORD
8486 CORDS
50084 CORD

```
                (CORD OR CORDS)
L10       29051 SPINAL CORD
                (SPINAL(W)CORD)

=> s l10 (s) l7
L11          11 L10 (S) L7

=> d tot

L11  ANSWER 1 OF 11  HCAPLUS  COPYRIGHT 2001 ACS
AN   2001:459556  HCAPLUS
TI   Pegylated Brain-Derived Neurotrophic Factor Shows Improved Distribution
     into the Spinal Cord and Stimulates Locomotor Activity and Morphological
     Changes after Injury
AU   Ankeny, Daniel P.; McTigue, Dana M.; Guan, Zhen; Yan, Qiao; Kinstler,
     Olaf; Stokes, Bradford T.; Jakeman, Lyn B.
CS   Department of Physiology and Cell Biology, The Ohio State University,
     Columbus, OH, 43210, USA
SO   Exp. Neurol. (2001), 170(1), 85-100
     CODEN: EXNEAC; ISSN: 0014-4886
PB   Academic Press
DT   Journal
LA   English
RE.CNT  79
RE
(1) Altar, C; Exp Neurol, 10.1006/exnr.1994.1182 1994, V130, P31 HCAPLUS
(2) Anderson, K; J Comp Neurol 1995, V357, P296 HCAPLUS
(5) Beck, T; J Cereb Blood Flow Metab 1994, V14, P689 HCAPLUS
(7) Belcheva, N; Bioconjug Chem 1999, V10, P932 HCAPLUS
(8) Binder, D; Trends Neurosci 2001, V24, P47 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L11  ANSWER 2 OF 11  HCAPLUS  COPYRIGHT 2001 ACS
AN   2000:780106  HCAPLUS
DN   134:80539
TI   Comparative efficacies of terbinafine and fluconazole in treatment of
     experimental coccidioidal meningitis in a rabbit model
AU   Sorensen, Kevin N.; Sobel, Raymond A.; Clemons, Karl V.; Calderon,
     Leilani; Howell, Kimberley J.; Irani, Plomarz R.; Pappagianis,
     Demosthenes; Williams, Paul L.; Stevens, David A.
CS   Division of Infectious Diseases, Department of Medicine, Santa Clara
     Valley Medical Center, California Institute for Medical Research, San
     Jose, CA, 95128, USA
SO   Antimicrob. Agents Chemother. (2000), 44(11), 3087-3091
     CODEN: AMACCQ; ISSN: 0066-4804
PB   American Society for Microbiology
DT   Journal
LA   English
RE.CNT  18
RE
(1) Abdel-Rahman, S; Ann Pharmacother 1997, V31, P445 HCAPLUS
(2) Dewsnup, D; Ann Intern Med 1996, V124, P305 HCAPLUS
(3) Hostetler, J; Antimicrob Agents Chemother 1993, V37, P2224 HCAPLUS
(4) Kan, V; Antimicrob Agents Chemother 1986, V30, P628 HCAPLUS
(5) Levine, H; J Infect Dis 1975, V132, P407 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L11  ANSWER 3 OF 11  HCAPLUS  COPYRIGHT 2001 ACS
AN   2000:367588  HCAPLUS
DN   133:99139
TI   Comparison of fluconazole and itraconazole in a rabbit model of
     coccidioidal meningitis
AU   Sorensen, Kevin N.; Sobel, Raymond A.; Clemons, Karl V.; Pappagianis,
     Demosthenes; Stevens, David A.; Williams, Paul L.
CS   Department of Medicine, Division of Infectious Diseases, Santa Clara
     Valley Medical Center, San Jose, CA, 95128, USA
SO   Antimicrob. Agents Chemother. (2000), 44(6), 1512-1517
     CODEN: AMACCQ; ISSN: 0066-4804
PB   American Society for Microbiology
DT   Journal
LA   English
RE.CNT  27
RE
```

(3) Clemons, K; Antimicrob Agents Chemother 1990, V34, P928 HCAPLUS
(5) Dewsnup, D; Ann Intern Med 1996, V124, P305 HCAPLUS
(9) Hostetler, J; Antimicrob Agents Chemother 1993, V37, P2224 HCAPLUS
(11) Louie, A; Antimicrob Agents Chemother 1998, V42, P1512 HCAPLUS
(12) Lutz, J; Antimicrob Agents Chemother 1997, V41, P1558 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L11 ANSWER 4 OF 11 HCAPLUS COPYRIGHT 2001 ACS
AN 2000:177753 HCAPLUS
TI Functional recovery of paraplegic rats and motor axon regeneration in their spinal cords by olfactory ensheathing glia
AU Ramon-Cueto, Almudena; Cordero, M. Isabel; Santos-Benito, Fernando F.; Avila, Jesus
CS Centro de Biologia Molecular "Severo Ochoa" (CSIC-UAM) Facultad de Ciencias Universidad Autonoma de Madrid, Madrid, 28049, Spain
SO Neuron (2000), 25(2), 425-435
CODEN: NERNET; ISSN: 0896-6273
PB Cell Press
DT Journal
LA English
RE.CNT 56
RE
(5) Bovolenta, P; Prog Brain Res 1992, V94, P367 HCAPLUS
(6) Bregman, B; Curr Opin Neurobiol 1998, V8, P800 HCAPLUS
(7) Bregman, B; Exp Neurol 1998, V149, P13 HCAPLUS
(8) Bregman, B; Nature 1995, V378, P498 HCAPLUS
(9) Cassam, A, Neuroscience 1999, V88, P1275 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L11 ANSWER 5 OF 11 HCAPLUS COPYRIGHT 2001 ACS
AN 2000:51638 HCAPLUS
DN 132:203028
TI Immediate recovery from **spinal cord** injury through molecular repair of nerve membranes with **polyethylene glycol**
AU Borgens, Richard B.; Shi, Riyi
CS Center for Paralysis Research, Department of Basic Medical Sciences, School of Veterinary Medicine, Purdue University, West Lafayette, IN, 47907, USA
SO FASEB J. (2000), 14(1), 27-35
CODEN: FAJOEC; ISSN: 0892-6638
PB Federation of American Societies for Experimental Biology
DT Journal
LA English
RE.CNT 39
RE
(1) Ahkong, Q; J Cell Sci 1987, V88, P389 HCAPLUS
(15) Davidson, R; Somat Cell Genet 1976, V2, P271 HCAPLUS
(18) Hannig, J; Int J Radiat Biol 1999, V75, P379 HCAPLUS
(20) Lee, J; Biochemistry 1997, V36, P6251 HCAPLUS
(22) Lee, R; Proc Natl Acad Sci USA 1992, V89, P4524 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L11 ANSWER 6 OF 11 HCAPLUS COPYRIGHT 2001 ACS
AN 1999:376637 HCAPLUS
DN 131:179700
TI Acute repair of crushed guinea pig **spinal cord** by **polyethylene glycol**
AU Shi, Riyi; Borgens, Richard B.
CS Center for Paralysis Research, Department of Basic Medical Sciences, Purdue University, West Lafayette, IN, 47907, USA
SO J. Neurophysiol. (1999), 81(5), 2406-2414
CODEN: JONEA4; ISSN: 0022-3077
PB American Physiological Society
DT Journal
LA English
RE.CNT 30
RE
(1) Ahkong, Q, J Cell Sci 1987, V88, P389 HCAPLUS
(3) Bittner, G; Brain Res 1986, V367, P351 HCAPLUS
(5) Blight, A; Brain Res Bull 1989, V22, P47 HCAPLUS
(8) Borgens, R; Proc Natl Acad Sci USA 1980, V77, P1209 HCAPLUS
(9) Davidson, R; Somat Cell Genet 1976, V2, P271 HCAPLUS

ALL CITATIONS AVAILABLE IN THE RE FORMAT

L11 ANSWER 7 OF 11 HCAPLUS COPYRIGHT 2001 ACS
AN 1995:582983 HCAPLUS
DN 123:31089
TI Inhibition of tumor necrosis factor is protective against neurologic dysfunction after active immunization of Lewis rats with myelin basic protein
AU Martin, David; Near, Stephanie L.; Bendele, Alison; Russell, Deborah A.
CS Department Pharmacology, Synergen Inc., Boulder, CO, 80301, USA
SO Exp. Neurol. (1995), 131(2), 221-8
CODEN: EXNEAC; ISSN: 0014-4886
DT Journal
LA English

L11 ANSWER 8 OF 11 HCAPLUS COPYRIGHT 2001 ACS
AN 1983:416918 HCAPLUS
DN 99:16918
TI Fastigial stimulation releases vasopressin in amounts that elevate arterial pressure
AU Del Bo, Alberto; Sved, Alan F.; Reis, Donald J.
CS Med. Coll., Cornell Univ., New York, NY, 10021, USA
SO Am. J. Physiol. (1983), 244(5), H687-H694
CODEN: AJPHAP; ISSN: 0002-9513
DT Journal
LA English

L11 ANSWER 9 OF 11 HCAPLUS COPYRIGHT 2001 ACS
AN 1978:187410 HCAPLUS
DN 88:187410
TI The diminution of the myelin ethanolamine plasmalogen in brain of the Jimpy mouse and brain and spinal cord of the Quaking mouse as visualized by thin-layer chromatography
AU Hack, M. H.; Helmy, F. M.
CS Dep. Med., Tulane Univ., New Orleans, La., USA
SO J. Chromatogr. (1978), 145(2), 307-10
CODEN: JOCRAM; ISSN: 0021-9673
DT Journal
LA English

L11 ANSWER 10 OF 11 HCAPLUS COPYRIGHT 2001 ACS
AN 1956:9696 HCAPLUS
DN 50:9696
OREF 50:2064g-h
TI Spinal cord damage by Efocaine
AU Clarke, Edwin; Morrison, Robert; Roberts, Hilda
CS Postgrad. Med. School, London
SO Lancet (1955), 268, 896-8
DT Journal
LA Unavailable

L11 ANSWER 11 OF 11 HCAPLUS COPYRIGHT 2001 ACS
AN 1953:68099 HCAPLUS
DN 47:68099
OREF 47:11545h-i,11546a
TI Return of cholinesterase activity in the rat after inhibition by organophosphorus compounds. I. Diethyl p-nitrophenylphosphate (E 600, paraoxon)
AU Davison, A. N.
CS Med. Research Council Unit in Toxicology, Carshalton, Surrey, UK
SO Biochem. J. (1953), 54, 583-90
DT Journal
LA Unavailable

=> d ibib abs kwic 7-11

L11 ANSWER 7 OF 11 HCAPLUS COPYRIGHT 2001 ACS
ACCESSION NUMBER: 1995:582983 HCAPLUS
DOCUMENT NUMBER: 123:31089
TITLE: Inhibition of tumor necrosis factor is protective against neurologic dysfunction after active immunization of Lewis rats with myelin basic protein

AUTHOR(S): Martin, David; Near, Stephanie L.; Bendele, Alison; Russell, Deborah A.
CORPORATE SOURCE: Department Pharmacology, Synergen Inc., Boulder, CO, 80301, USA
SOURCE: Exp. Neurol. (1995), 131(2), 221-8
CODEN: EXNEAC; ISSN: 0014-4886
DOCUMENT TYPE: Journal
LANGUAGE: English

AB Increasing evidence indicates that the cytokines, tumor necrosis factor (TNF), interleukin-1, and/or interferon-.gamma., may play a crucial role in the pathogenesis of multiple sclerosis. Several reports demonstrated that inhibition of TNF is highly protective in exptl. allergic encephalomyelitis (EAE) when sensitization is accomplished by the passive transfer of myelin basic protein (MBP) sensitized lymphocytes. However, successful protection has not been reported in EAE that is induced by active immunization with MBP. We examd. the effects of a TNF inhibitor, dimeric polyethylene glycol linked form of the type I sol. receptor of TNF, PEG-(rsTNF-RI)2, on actively acquired EAE. Treatment with PEG-(rsTNF-RI)2 at 0.3-3 mg/kg every other day or every third day starting on Day 9 postimmunization with MBP during the effector phase of EAE significantly inhibited clin. signs in a dose-dependent manner. Histol. examn. of the central nervous system indicated that the administration of PEG-(rsTNF-RI)2 reduced, in part, the cellular infiltrate, particularly in the lumbar and sacral regions of the **spinal cord**. These studies suggest suggest that TNF is a pivotal mediator of the inflammation resulting from the complete immune response induced by active immunization with MBP.

L11 ANSWER 8 OF 11 HCAPLUS COPYRIGHT 2001 ACS
ACCESSION NUMBER: 1983:416918 HCAPLUS
DOCUMENT NUMBER: 99:16918
TITLE: Fastigial stimulation releases vasopressin in amounts that elevate arterial pressure
AUTHOR(S): Del Bo, Alberto; Sved, Alan F.; Reis, Donald J.
CORPORATE SOURCE: Med. Coll., Cornell Univ., New York, NY, 10021, USA
SOURCE: Am. J. Physiol. (1983), 244(5), H687-H694
CODEN: AJPHAP; ISSN: 0002-9513
DOCUMENT TYPE: Journal
LANGUAGE: English

AB Elec. stimulation of the cerebellar fastigial nucleus (FN) in anesthetized, paralyzed, and artificially ventilated rats resulted in a stimulus-locked elevation in arterial pressure (AP) and heart rate, the fastigial pressor response (FPR). Blockade of autonomic effectors by chemosympathectomy with 6-hydroxydopamine combined with adrenalectomy, or by **spinal cord** transection at C1, abolished the **FPR** but unmasked an elevation of AP with longer latency and duration, termed the residual **FPR**. The residual FPR was abolished by midbrain transection, blocked by administration of a specific antagonist of the vasopressor response to arginine vasopressin (AVP) [113-79-1], and was absent in homozygous and attenuated in heterozygous Brattleboro rats. FN stimulation elevated AVP 3-fold in intact rats and 7-fold in rats with combined chemosympathectomy and adrenalectomy. Stimulation of the cerebellar FN can release AVP. In the absence of sympathoadrenal effectors, the amt. so released is enhanced and capable of elevating AP.

L11 ANSWER 9 OF 11 HCAPLUS COPYRIGHT 2001 ACS
ACCESSION NUMBER: 1978:187410 HCAPLUS
DOCUMENT NUMBER: 88:187410
TITLE: The diminution of the myelin ethanolamine plasmalogen in brain of the Jimpy mouse and brain and spinal cord of the Quaking mouse as visualized by thin-layer chromatography
AUTHOR(S): Hack, M. H.; Helmy, F. M.
CORPORATE SOURCE: Dep. Med., Tulane Univ., New Orleans, La., USA
SOURCE: J. Chromatogr. (1978), 145(2), 307-10
CODEN: JOCRAM; ISSN: 0021-9673
DOCUMENT TYPE: Journal
LANGUAGE: English

AB The phosphatides and glycolipids of the CHCl3-MeOH (2:1, vol./vol.) ext. of brains of mutant Jimpy mice and of brains and spinal cords of Quaking mice were analyzed chromatog. on Schleicher and Schuell F-1500 silica gel thin-layer plastic sheets with a CHCl3-EtOH-water (65:25:3) solvent

system. The myelin ethanolamine plasmalogen species PE-2 of brain increased progressively with increasing postnatal age in normal mice, was practically absent in 17-day-old Jimpy mice, and was even more diminished, in comparison to age-matched controls, in 40 or 50-day-old Quaking mice. The **PE-2** deficit of the latter animals was even more striking in **spinal cord** exts. The amt. of ethanolamine plasmalogen species PE-1 was also diminished in the brain of Jimpy mutants in comparison with age-matched normal controls.

L11 ANSWER 10 OF 11 HCAPLUS COPYRIGHT 2001 ACS
ACCESSION NUMBER: 1956:9696 HCAPLUS
DOCUMENT NUMBER: 50:9696
ORIGINAL REFERENCE NO.: 50:2064g-h
TITLE: Spinal cord damage by Efocaine
AUTHOR(S): Clarke, Edwin; Morrison, Robert; Roberts, Hilda
CORPORATE SOURCE: Postgrad. Med. School, London
SOURCE: Lancet (1955), 268, 896-8
DOCUMENT TYPE: Journal
LANGUAGE: Unavailable
AB **Spinal cord** damage by paravertebral injection of Efocaine (procaine 1%, procaine hydrochloride 0.25%, and butyl aminobenzoate 5% in **polyethylene glycol** of mol. wt. 300 2%, propylene glycol 78%, and water) is described.

L11 ANSWER 11 OF 11 HCAPLUS COPYRIGHT 2001 ACS
ACCESSION NUMBER: 1953:68099 HCAPLUS
DOCUMENT NUMBER: 47:68099
ORIGINAL REFERENCE NO.: 47:11545h-i,11546a
TITLE: Return of cholinesterase activity in the rat after inhibition by organophosphorus compounds. I. Diethyl p-nitrophenylphosphate (E 600, paraoxon)
AUTHOR(S): Davison, A. N.
CORPORATE SOURCE: Med. Research Council Unit in Toxicology, Carshalton, Surrey, UK
SOURCE: Biochem. J. (1953), 54, 583-90
DOCUMENT TYPE: Journal
LANGUAGE: Unavailable
AB The return of cholinesterase activity in vivo after inhibition by organophosphorus compds. has been attributed to a resynthesis of new enzyme or to a phosphorylation of the enzyme. The rates of recovery of rat cholinesterases from inhibition by **E 600** have been found to differ strikingly for pseudocholinesterases of brain and **spinal cord**, and other pseudocholinesterases. In the central nervous system the pseudo- and true cholinesterases recover at similar rates, but the reversal rates have revealed a distinction between the pseudocholinesterases of the central nervous system and of other tissues not otherwise detected. After inhibition by E 600 total recovery of enzyme activity (pseudocholinesterase) of various rat organs occurs in about a day both in vivo or in vitro, but the recovery of true cholinesterase is slow, about 60% in 4 days.

```
=> s spinal cord (a) (trauma or injur? or damag? or blow? or shock?)
         42975 SPINAL
            13 SPINALS
         42986 SPINAL
                 (SPINAL OR SPINALS)
         47677 CORD
          8486 CORDS
         50084 CORD
                 (CORD OR CORDS)
         29051 SPINAL CORD
                 (SPINAL(W)CORD)
          9469 TRAUMA
           187 TRAUMAS
            16 TRAUMATA
          9589 TRAUMA
                 (TRAUMA OR TRAUMAS OR TRAUMATA)
         93752 INJUR?
        280856 DAMAG?
         80921 BLOW?
        105213 SHOCK?
L12       1972 SPINAL CORD (A) (TRAUMA OR INJUR? OR DAMAG? OR BLOW? OR SHOCK?)
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=> s l12 and l7
L13          5 L12 AND L7

=> s l13 not l11
L14          0 L13 NOT L11

=> s l12 and l5
L15          9 L12 AND L5

=> s l15 not l11
L16          4 L15 NOT L11

=> d tot

L16  ANSWER 1 OF 4  HCAPLUS  COPYRIGHT 2001 ACS
AN   2001:731315  HCAPLUS
DN   135:267237
TI   Cytokine antagonists for the treatment of localized disorders
IN   Tobinick, Edward L.
PA   USA
SO   U.S. Pat. Appl. Publ., 10 pp., Cont.-in-part of U.S. 2001 16,195.
     CODEN: USXXCO
DT   Patent
LA   English
FAN.CNT 5
     PATENT NO.        KIND  DATE           APPLICATION NO.  DATE
     ---------------   ----  --------       ---------------  --------
PI   US 2001026801      A1   20011004       US 2001-841844   20010425
     US 6015557         A    20000118       US 1999-275070   19990323
     US 6177077         B1   20010123       US 1999-476643   19991231
     US 2001016195      A1   20010823       US 2001-826976   20010405
PRAI US 1999-256388     B2   19990224
     US 1999-275070     A2   19990323
     US 1999-476643     A2   19991231
     US 2000-563651     A2   20000502
     US 2001-826976     A2   20010405

L16  ANSWER 2 OF 4  HCAPLUS  COPYRIGHT 2001 ACS
AN   2001:380370  HCAPLUS
DN   135:9995
TI   Pharmaceuticals containing sildenafil for treating male erectile
     dysfunction
IN   Vallabhaneni, Ramakrishna Rao
PA   Natco Pharma Ltd., India
SO   PCT Int. Appl., 19 pp.
     CODEN: PIXXD2
DT   Patent
LA   English
FAN.CNT 1
     PATENT NO.        KIND  DATE           APPLICATION NO.  DATE
     ---------------   ----  --------       ---------------  --------
PI   WO 2001035926      A2   20010525       WO 2000-IN105    20001024
         W:  AE, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU,
             CZ, DE, DK, DM, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL,
             IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA,
             MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI,
             SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM,
             AZ, BY, KG, KZ, MD, RU, TJ, TM
         RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY,
             DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ,
             CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG
PRAI IN 1999-MA1128     A    19991118

L16  ANSWER 3 OF 4  HCAPLUS  COPYRIGHT 2001 ACS
AN   2001:25671  HCAPLUS
DN   134:76448
TI   Guided development and support of hydrogel-cell compositions
IN   Vacanti, Charles A.; Vacanti, Joseph P.; Vacanti, Martin P.
PA   University of Massachusetts, USA; Children's Medical Center Corporation
SO   U.S., 21 pp., Cont.-in-part of U.S. Ser. No. 66,038.
     CODEN: USXXAM
DT   Patent
LA   English
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FAN.CNT 1
     PATENT NO.        KIND  DATE           APPLICATION NO.  DATE
     ---------------   ----  --------       ---------------  --------
PI   US 6171610         B1   20010109       US 1998-200033   19981125
     EP 1076533         A1   20010221       EP 1999-921398   19990422
         R:  AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
             IE, FI
PRAI US 1998-66038      A2   19980424
     US 1998-200033     A    19981125
     WO 1999-US8471     W    19990422
RE.CNT  20
RE
(3) Anon; WO 9206702 1992 HCAPLUS
(4) Anon; WO 9316687 1993 HCAPLUS
(5) Anon; WO 9324627 1993 HCAPLUS
(6) Anon; WO 9425079 1994 HCAPLUS
(7) Anon; WO 9425080 1994 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L16  ANSWER 4 OF 4  HCAPLUS  COPYRIGHT 2001 ACS
AN   2000:900787  HCAPLUS
DN   134:38871
TI   Crystal structure of a recombinant human caspase-8, identification of
     substrate binding pocket and applications to drug design
IN   Watt, William; Watenpaugh, Keith D.
PA   Pharmacia and Upjohn Company, USA
SO   PCT Int. Appl., 123 pp.
     CODEN: PIXXD2
DT   Patent
LA   English
FAN.CNT 1
     PATENT NO.        KIND  DATE           APPLICATION NO.  DATE
     ---------------   ----  --------       ---------------  --------
PI   WO 2000077184      A1   20001221       WO 2000-US15882  20000609
         W:  AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR,
             CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU,
             ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU,
             LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ; PL, PT, RO, RU, SD,
             SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU,
             ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
         RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY,
             DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ,
             CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG
PRAI US 1999-138430     P    19990610
     US 1999-150294     P    19990820
RE.CNT  9
RE
(1) Alnemri, S; WO 9735020 A 1997 HCAPLUS
(2) Blanchard, H; STRUCTURE (LONDON) V7(9), P1125 HCAPLUS
(5) Margolin, N; JOURNAL OF BIOLOGICAL CHEMISTRY 1997, V272(11), P7223 HCAPLUS
(6) Merck & Co Inc; WO 9731018 A 1997 HCAPLUS
(7) Muzio, M; CELL 1996, V85(6) HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT


=> d abs kwic 3

L16  ANSWER 3 OF 4  HCAPLUS  COPYRIGHT 2001 ACS
AB   The invention features a method for generating new tissue by obtaining a
     liq. hydrogel-cell compn. including a hydrogel and tissue precursor cells;
     delivering the liq. hydrogel-cell compn. into a permeable, biocompatible
     support structure; and allowing the liq. hydrogel-cell compn. to solidify
     within the support structure and the tissue precursor cells to grow and
     generate new tissue.  The invention also features a tissue forming
     structure including a permeable, biocompatible support structure having a
     predetd. shape that corresponds to the shape of desired tissue; and a
     hydrogel-cell compn. at least partially filling the support structure,
     wherein the hydrogel-cell compn. includes a hydrogel and tissue precursor
     cells.  The new tissue forming structure can be used in new methods to
     generate various tissues (e.g., to treat defective tissue) including new
     bone, cartilage, and nervous tissue such as spinal cord tissue.  The
     invention also features new isolated nervous system stem cells.  For
     example, adult rat spinal cord stem cells were suspended in culture medium
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supplemented with Pluronic F127 and then used to permeate a mesh of poly(glycolic acid) (PGA) fibers. The PGA mesh held the Pluronic gel by capillary action and provided guidance for the growth of the neural stem cells once implanted into an animal.

IT **Spinal cord**
(**injury**, repair; guided development and support of hydrogel-cell compns. for tissue generation)

IT 9003-01-4, Poly(acrylic acid) 9003-20-7, Poly(vinyl acetate) 9005-35-0, Calcium alginate 25087-26-7, Poly(methacrylic acid) 25751-21-7, Acrylic acid-methacrylic acid copolymer 26009-03-0, Poly(glycolic acid) 26023-30-3, Poly[oxy(1-methyl-2-oxo-1,2-ethanediyl)] 26100-51-6, Poly(lactic acid) 26124-68-5, Poly(glycolic acid) 26780-50-7, Polyglactin 106392-12-5, Polyoxyethylene-polyoxypropylene block copolymer 152865-13-9, **Oxirane**, **polymer** with 1,2-ethanediamine and methyloxirane, block
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(guided development and support of hydrogel-cell compns. for tissue generation)

```
=> fil medlin capl biosis

=> s Depo medrol or methylprednisolone
L17      22642 DEPO MEDROL OR METHYLPREDNISOLONE

=> s l6
L18    1100399 L6

=> s l17 and l18
L19       1661 L17 AND L18

=> s l17 (s) l18
L20       1053 L17 (S) L18

=> s l1 or polyethylene glycol
L21     133142 L1 OR POLYETHYLENE GLYCOL

=> s l20 (s) l21
L22          3 L20 (S) L21

=> s depo medrol (s) l20
L23         44 DEPO MEDROL (S) L20

=> dup remm l23
ENTER REMOVE, IDENTIFY, ONLY, OR (?):rem
PROCESSING COMPLETED FOR L23
L24          36 DUP REM L23 REMM (8 DUPLICATES REMOVED)

=> focus
PROCESSING COMPLETED FOR L24
L25          36 FOCUS L24 1-

=> d ibib abs kwic 1-10

L25  ANSWER 1 OF 36     MEDLINE
ACCESSION NUMBER:   77095992     MEDLINE
DOCUMENT NUMBER:    77095992   PubMed ID: 1037000
TITLE:              Sclerosing spinal pachymeningitis. A complication
                    of intrathecal administration of Depo-
                    Medrol for multiple sclerosis.
AUTHOR:             Bernat J L; Sadowsky C H; Vincent F M; Nordgren R E;
                    Margolis G
SOURCE:             JOURNAL OF NEUROLOGY, NEUROSURGERY AND PSYCHIATRY, (1976
                    Nov) 39 (11) 1124-8.
                    Journal code: JBB; 2985191R. ISSN: 0022-3050.
PUB. COUNTRY:       ENGLAND: United Kingdom
                    Journal; Article; (JOURNAL ARTICLE)
LANGUAGE:           English
FILE SEGMENT:       Priority Journals
ENTRY MONTH:        197703
ENTRY DATE:         Entered STN: 19900313
                    Last Updated on STN: 19900313
                    Entered Medline: 19770331
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AB Reported complications of **intrathecal** steroid therapy include aseptic meningitis, infectious meningitis, and arachnoiditis. We report a case of sclerosing **spinal** pachymeningitis complicating the attempted **intrathecal** administration of **Depo-Medrol** for multiple sclerosis. The lesion is characterised by concentric laminar proliferation of neomembranes within the subdural space of the entire **spinal** cord and cauda equina, resulting from repeated episodes of injury and repair to the **spinal** dura mater by **Depo-Medrol**. There is clinical and laboratory evidence that **Depo-Medrol** produces meningeal irritation and that the vehicle is the necrotising fraction.

TI Sclerosing **spinal** pachymeningitis. A complication of **intrathecal** administration of **Depo-Medrol** for multiple sclerosis.

L25 ANSWER 2 OF 36 MEDLINE
ACCESSION NUMBER: 78125985 MEDLINE
DOCUMENT NUMBER: 78125985 PubMed ID: 75775
TITLE: Management of diskogenic pain using epidural and intrathecal steroids.
AUTHOR: Brown F W
SOURCE: CLINICAL ORTHOPAEDICS AND RELATED RESEARCH, (1977 Nov-Dec) (129) 72-8.
Journal code: DFY; 0075674. ISSN: 0009-921X.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 197805
ENTRY DATE: Entered STN: 19900314
Last Updated on STN: 19900314
Entered Medline: 19780524

AB The use of **methylprednisolone** acetate (**Depo-Medrol**) injected by the **epidural** or **intrathecal** route for the relief of diskogenic back pain with or without radiculopathy is an adjunct to conservative management useful when conservative measures fail and surgical treatment is under consideration. This is especially true when symptoms have been present for only a few months. Corticosteroids injected in the same manner seem to have little effect on patients with symptoms persisting for periods longer than 3 months or in patients treated previously by surgical methods.

L25 ANSWER 3 OF 36 MEDLINE
ACCESSION NUMBER: 93181775 MEDLINE
DOCUMENT NUMBER: 93181775 PubMed ID: 8441945
TITLE: Intraspinal therapy using methylprednisolone acetate. Twenty-three years of clinical controversy.
AUTHOR: Nelson D A
CORPORATE SOURCE: Section of Neurology, Medical Center of Delaware, Wilmington.
SOURCE: SPINE, (1993 Feb) 18 (2) 278-86.
Journal code: UXK; 7610646. ISSN: 0362-2436.
PUB. COUNTRY: United States
Historical
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199303
ENTRY DATE: Entered STN: 19930416
Last Updated on STN: 19930416
Entered Medline: 19930330

AB The **intraspinal** use of **methylprednisolone** acetate (**Depo-Medrol**, Upjohn Company, Kalamazoo MI) began in 1960, followed 10 years later by reports of complications. In 1960, **methylprednisolone** acetate was first injected by the **epidural** route to treat low-back syndromes. Then in 1961, the **intrathecal** route was more widely used to treat arachnoiditis and multiple sclerosis. **Epidural** therapy again came into general use in 1980 for the treatment of the failed-back syndrome because **intrathecal** therapy was virtually abandoned after 10 years of spirited scientific controversy. **Epidural** steroid therapy is now employed extensively, and there are many sanguine reports of its efficacy in treating chronic pain secondary to the failed-back syndrome, but there

have also been reports of complications. This review was prompted by recent manufacturer warnings, as well as by an ongoing heated controversy in Australia regarding its use **epidurally**. During the last 30 years, one can define 5 instructive historical parallels between **intrathecal** and **epidural** steroid therapy, and this historicity points up several principles that should govern any further **epidural** therapy with **methylprednisolone** acetate. This critical chronologic review surveys neurosurgical use from 1960 to 1970, neurologic use from 1970 to 1980, and anesthesiology use from 1980 to present.

L25 ANSWER 4 OF 36 MEDLINE
ACCESSION NUMBER: 88129249 MEDLINE
DOCUMENT NUMBER: 88129249 PubMed ID: 3124393
TITLE: Calcification and ossification of the **spinal** arachnoid after **intrathecal** administration of **Depo-Medrol**.
AUTHOR: Carta F; Canu C; Datti R; Guiducci G; Pisani R; Silvestro C
CORPORATE SOURCE: Department of Neurosurgery, University of Genova.
SOURCE: ZENTRALBLATT FUR NEUROCHIRURGIE, (1987) 48 (3) 256-61. Journal code: Y6C; 0413646. ISSN: 0044-4251.
PUB. COUNTRY: GERMANY, EAST: German Democratic Republic
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198803
ENTRY DATE: Entered STN: 19900308
Last Updated on STN: 19900308
Entered Medline: 19880318

AB A woman 38-year-old, suffering for about ten years from multiple sclerosis and treated with repeated therapy cycles of **intrathecal** **Depo-Medrol**, developed a spastic paraparesis at the lower limbs. A lumbar myelography was carried out, and a dorsal block was demonstrated. The patient underwent a dorsal laminectomy, and arachnoidal calcification and ossification was find, but the removal of the bone plaques was ineffectual in order to the subsequent course of the neurological troubles. The results of the histological study and chemical tests are reported, and the etiology and the pathogenesis are discussed on the basis of the pertinent literature.

TI Calcification and ossification of the **spinal** arachnoid after **intrathecal** administration of **Depo-Medrol**.

L25 ANSWER 5 OF 36 MEDLINE
ACCESSION NUMBER: 82103377 MEDLINE
DOCUMENT NUMBER: 82103377 PubMed ID: 7033742
TITLE: Management of lumbar nerve-root pain by intrathecal and epidural injections of depot methylprednisolone acetate.
AUTHOR: Ryan M D; Taylor T K
SOURCE: MEDICAL JOURNAL OF AUSTRALIA, (1981 Nov 14) 2 (10) 532-4. Journal code: M26; 0400714. ISSN: 0025-729X.
PUB. COUNTRY: Australia
(CLINICAL TRIAL)
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198203
ENTRY DATE: Entered STN: 19900317
Last Updated on STN: 19900317
Entered Medline: 19820322

AB Sciatica is one of the most incapacitating and difficult to treat of all benign pains. This is a report of the results of using **epidural** and **intrathecal** corticosteroids in depot form, **methylprednisolone** acetate (**Depo-Medrol**), in 108 patients who presented with a clinical diagnosis of acute lumbar disc prolapse and nerve-root pain. There was a 75% response rate in patients with less than four weeks of symptoms, whereas in patients with more than six weeks of symptoms the rate dropped to 43%. Patients with a high level of protein in their **cerebrospinal** fluid appeared to have a higher response rate. The treatment is most likely to be effective when the patient is male, the duration of symptoms is less than four weeks, and the patient has irritant rather than compressive neuropathy.

L25 ANSWER 6 OF 36 MEDLINE

ACCESSION NUMBER: 91312259 MEDLINE
DOCUMENT NUMBER: 91312259 PubMed ID: 1953887
TITLE: **Epidural** use of **methylprednisolone** acetate (**Depo-Medrol**).
COMMENT: Comment on: Med J Aust. 1991 Jun 17;154(12):854
AUTHOR: Maxwell D C
SOURCE: MEDICAL JOURNAL OF AUSTRALIA, (1991 Jul 15) 155 (2) 134.
Journal code: M26; 0400714. ISSN: 0025-729X.
PUB. COUNTRY: Australia
Commentary
Letter
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199108
ENTRY DATE: Entered STN: 19910913
Last Updated on STN: 19910913
Entered Medline: 19910826
TI **Epidural** use of **methylprednisolone** acetate (**Depo-Medrol**).

L25 ANSWER 7 OF 36 MEDLINE
ACCESSION NUMBER: 91251827 MEDLINE
DOCUMENT NUMBER: 91251827 PubMed ID: 2041521
TITLE: **Epidural** use of **methylprednisolone** acetate (**Depo-Medrol**).
COMMENT: Comment on: Med J Aust. 1991 Mar 18;154(6):428-9
Comment in: Med J Aust. 1991 Jul 15;155(2):134
AUTHOR: Anonymous
SOURCE: MEDICAL JOURNAL OF AUSTRALIA, (1991 Jun 17) 154 (12) 854.
Journal code: M26; 0400714. ISSN: 0025-729X.
PUB. COUNTRY: Australia
Commentary
Letter
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199107
ENTRY DATE: Entered STN: 19910728
Last Updated on STN: 19910728
Entered Medline: 19910710
TI **Epidural** use of **methylprednisolone** acetate (**Depo-Medrol**).

L25 ANSWER 8 OF 36 MEDLINE
ACCESSION NUMBER: 97396936 MEDLINE
DOCUMENT NUMBER: 97396936 PubMed ID: 9253088
TITLE: The pathologic effects of intrathecal betamethasone.
AUTHOR: Latham J M; Fraser R D; Moore R J; Blumbergs P C; Bogduk N
CORPORATE SOURCE: Department of Orthopaedic Surgery and Trauma, Royal Adelaide Hospital, Australia.
SOURCE: SPINE, (1997 Jul 15) 22 (14) 1558-62.
Journal code: UXK; 7610646. ISSN: 0362-2436.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199709
ENTRY DATE: Entered STN: 19971013
Last Updated on STN: 19971013
Entered Medline: 19970929
AB STUDY DESIGN: The histopathologic effects of the **intrathecal** injection of betamethasone (Celestone Chronodose; Schering Corporation, Kenilworth, New Jersey) were assessed after the injection of various volumes of the preparation in 20 sheep. OBJECTIVE: To assess the safety of Celestone Chronodose injected into the **intrathecal** space. SUMMARY OF BACKGROUND DATA: The safety and efficacy of **epidural** steroid have received considerable attention in the medical literature in recent years. In Australia, reports of possible adverse effects of **Depo-Medrol** (**methylprednisolone**), including the complication of arachnoiditis, have been followed by statements from the manufacturers of commonly used steroid preparations recommending they should not be administered **epidurally**. Previous evidence suggests that arachnoiditis does not result from **epidural** administration of steroids, but may develop from the **intrathecal**

administration of **Depo-Medrol**. There are no reports concerning the safety of Celestone Chronodose (beta-methasone). METHODS: Twenty-three adult merino sheep had lumbar punctures performed at the L6-S1 level, and different volumes of Celestone Chronodose or normal saline were injected into the subarachnoid space. The animals were killed after 6 weeks, and the **spinal** cord, meninges, and nerve roots of the lumbar **spine** were examined for evidence of pathologic changes. RESULTS: There were no abnormalities demonstrated in three sheep injected with up to 18 ml of normal saline solution. Eleven sheep injected with 1 ml (5.7 mg) of Celestone Chronodose even when repeated at weekly intervals (five sheep, three injections) did not demonstrate pathologic changes. One of six sheep injected with 2 ml of Celestone Chronodose and all of three sheep injected with greater volumes showed histopathologic changes of arachnoiditis. CONCLUSIONS: Given that the volume of **cerebrospinal** fluid in the sheep is approximately one third of that in humans, this study suggests that small volumes (up to 2 ml) of Celestone Chronodose injected intrathecally in humans are unlikely to cause arachnoiditis, but that the risk of this complication increases substantially with higher doses.

L25 ANSWER 9 OF 36 MEDLINE
ACCESSION NUMBER: 82057629 MEDLINE
DOCUMENT NUMBER: 82057629 PubMed ID: 6895401
TITLE: **Intrathecal** and **epidural**/extradural injection of **Depo Medrol**.
AUTHOR: Jacobs D
SOURCE: MEDICAL JOURNAL OF AUSTRALIA, (1981 Sep 19) 2 (6) 301. Journal code: M26; 0400714. ISSN: 0025-729X.
PUB. COUNTRY: Australia
Letter
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198201
ENTRY DATE: Entered STN: 19900316
Last Updated on STN: 19900316
Entered Medline: 19820128
TI **Intrathecal** and **epidural**/extradural injection of **Depo Medrol**.

L25 ANSWER 10 OF 36 MEDLINE
ACCESSION NUMBER: 88268488 MEDLINE
DOCUMENT NUMBER: 88268488 PubMed ID: 3291836
TITLE: Dangers from methylprednisolone acetate therapy by intraspinal injection.
COMMENT: Comment in: Arch Neurol. 1989 Jul/46(7):721-2
Comment in: Arch Neurol. 1989 Jul;46(7):718-91
Comment in: Arch Neurol. 1989 Jul;46(7):719-2
Comment in: Arch Neurol. 1989 Nov;46(11):1167-8
AUTHOR: Nelson D A
CORPORATE SOURCE: Section of Neurology in Medicine, Medical Center of Delaware, Wilmington.
SOURCE: ARCHIVES OF NEUROLOGY, (1988 Jul) 45 (7) 804-6. Ref: 45 Journal code: 80K; 0372436. ISSN: 0003-9942.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
General Review; (REVIEW)
(REVIEW, TUTORIAL)
LANGUAGE: English
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals
ENTRY MONTH: 198808
ENTRY DATE: Entered STN: 19900308
Last Updated on STN: 19900308
Entered Medline: 19880805
AB Clinical trials first began in 1960 with **methylprednisolone** acetate (**Depo-Medrol**) administered intrathecally, in an attempt to treat both disk disease and multiple sclerosis. After a few reports of salubrious results, there began an outpouring of contradictory data, which continues in 1988. During this time span, researchers who cautiously tested the different theses of improvement began to publish serious warnings of many complications. For ten years prior to the **intraspinal** use of **methylprednisolone** acetate, basic scientists in anesthesiology and neurochemistry had published the following facts: (1) **Methylprednisolone** acetate's content of

polyethylene glycol raises the risks of using it near the central nervous system. (2) Deleterious effects follow the use of glycols when they are placed into or near the neuraxis. (3) **Methylprednisolone** acetate contains approximately 30 mg of polyethylene glycol per milliliter. (4) When that glycol, which is both alcohol and detergent, is injected **intraspinally**, sterile meningitis, arachnoiditis, or pachymeningitis will occur. It has also been recognized since the 1960s that the **epidural** space is not wholly separate from the subdural and/or subarachnoid space. Many thousands of arachnoid villi subtend all the membranes from the **intrathecal** space, and many of these end in the large **epidural** veins. Therefore, the various spaces and membranes are not only contiguous, but continuous. It follows that an injection of **methylprednisolone** acetate into the **epidural** space does not guarantee that it will remain isolated there. Finally, the inadvertency of injections by the **epidural** route occurs with the following frequency: 40% of injections can be inadvertently made into **interspinous** ligaments, and 2.5% into the subarachnoid space.

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L25 ANSWER 11 OF 36 MEDLINE
ACCESSION NUMBER: 80110795 MEDLINE
DOCUMENT NUMBER: 80110795 PubMed ID: 6153292
TITLE: The response to epidural steroid injections in chronic dorsal root pain.
AUTHOR: Forrest J B
SOURCE: CANADIAN ANAESTHETISTS SOCIETY JOURNAL, (1980 Jan) 27 (1) 40-6.
Journal code: CG7; 0371163. ISSN: 0008-2856.
PUB. COUNTRY: Canada
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198004
ENTRY DATE: Entered STN: 19900315
Last Updated on STN: 19900315
Entered Medline: 19800417

AB Thirty-seven patients with long-standing post-herpetic neuralgia and 27 with post-traumatic neuralgia (PTN) were treated with three **epidural** injections each of **methylprednisolone** acetate (**Depo Medrol**) given at weekly intervals. Differential subarachnoid or **epidural** block was done in all patients and placebo responders were excluded from the study. Mean age, duration of symptoms, and pain intensity measured by visual analogue scale were similar in both groups. Visual analogue scale ratings were reduced one month after treatments from both groups. Visual analogue scale ratings were reduced one month after treatments from pretreatment values of 84.4 and 78.7 to 9.6 and 15.2 in the post-herpetic and post-traumatic groups respectively, and were further reduced to 4.6 and 11.6 respectively after one year when 89 per cent of patients in the post-herpetic group and 59 per cent of patients in the post-traumatic group were completely pain free. Side effects were minor in all cases. It is suggested that this is the treatment of choice in post-herpetic and post-traumatic neuralgia where steroid administration is not contraindicated.

L25 ANSWER 12 OF 36 MEDLINE
ACCESSION NUMBER: 2001238414 MEDLINE
DOCUMENT NUMBER: 21232100 PubMed ID: 11334291
TITLE: Microcatheterization of the cervical epidural space via lumbar puncture: technical note.
AUTHOR: Amar A P; Wang M Y; Larsen D W; Teitelbaum G P
CORPORATE SOURCE: Department of Neurological Surgery, Keck School of Medicine, University of Southern California, Los Angeles 90033-1029, USA.. amar@aya.yale.edu
SOURCE: NEUROSURGERY, (2001 May) 48 (5) 1183-7.
Journal code: NZL; 7802914. ISSN: 0148-396X.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 200109
ENTRY DATE: Entered STN: 20010917

Last Updated on STN: 20010917
Entered Medline: 20010913

AB OBJECTIVE: Deposition of opiates, corticosteroids, or local anesthetics into the **epidural** space is useful for the management of painful maladies of the cervical and thoracic **spine**. We describe a novel technique for **epidural** medication delivery via an angiographic microcatheter inserted at or below the conus and advanced cephalad under fluoroscopic guidance. Unlike commercial kits used by anesthesiologists, this method uses a radiopaque catheter that can be precisely targeted to the levels of interest. The hazards of direct puncture, such as "wet tap" or injury to the cervical cord, are minimized. METHODS: An 18-gauge Tuohy needle is inserted into the lumbar **epidural** space. A 2.3-French microcatheter and a 0.018-inch steerable guidewire are then introduced through the lumen of the needle. The catheter is fluoroscopically advanced to the cervical **epidural** space, where **Depo-Medrol** (Pharmacia & Upjohn, Kalamazoo, MI) is administered. As the catheter is withdrawn, additional corticosteroid can be delivered to the thoracic **epidural** space, together with long-acting morphine compounds or local anesthetics. Regional pressures within the **epidural** space and other physiological parameters can be measured, and the local microenvironment can be sampled. RESULTS: To date, we have performed 16 procedures for 13 patients. All patients reported improvement, of varying extent and duration. There have been no complications. CONCLUSION: Our system of accessing the **epidural** space has many advantages, compared with direct puncture and commercially available kits. It provides a safe means of delivering **epidural** medication to multiple **spinal** levels and permits measurement of physiological variables that may be useful in the diagnosis and treatment of cervical and thoracic **spine** disease.

L25 ANSWER 13 OF 36 MEDLINE
ACCESSION NUMBER: 93163885 MEDLINE
DOCUMENT NUMBER: 93163885 PubMed ID: 8433138
TITLE: The perioperative use of corticosteroids and bupivacaine in the management of lumbar disc disease.
AUTHOR: Glasser R S; Knego R S; Delashaw J B; Fessler R G
CORPORATE SOURCE: Department of Neurosurgery, University of Florida, Gainesville.
SOURCE: JOURNAL OF NEUROSURGERY, (1993 Mar) 78 (3) 383-7.
Journal code: JD3; 0253357. ISSN: 0022-3085.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals
ENTRY MONTH: 199303
ENTRY DATE: Entered STN: 19930402
Last Updated on STN: 19930402
Entered Medline: 19930317

AB The introduction of microdiscectomy to lumbar **spine** surgery has resulted in a significant decrease in postoperative pain and length of hospital stay. Intraoperative application of long-acting local anesthetic agents has been used for many general and neurosurgical procedures for the management of postoperative pain. In addition, many surgeons routinely use intraoperative corticosteroids during lumbar discectomy to reduce traumatic nerve root inflammation. However, the efficacy of intraoperative long-acting local anesthetic agents and corticosteroids for reduction of postoperative discomfort has not been reported for lumbar discectomy. This study evaluated 32 patients at a university-based Veterans Administration hospital undergoing lumbar microdiscectomy. All 32 patients presented with radicular symptoms and had radiographic confirmation of a herniated nucleus pulposus. These patients were divided into three groups. Group 1 (12 patients) received 160 mg intramuscular **Depo-Medrol** (**methylprednisolone** acetate) and 250 mg intravenous Solu-Medrol (methyl-prednisolone sodium succinate) at the start of the operation. A macerated fat graft soaked in 80 mg **Depo-Medrol** was placed over the affected nerve root following discectomy. In addition, 30 ml of 0.25% bupivacaine was infiltrated into the **paraspinal** musculature at skin incision and during closure. Group 2 (10 patients) received 30 ml of 0.25% bupivacaine infiltrated into the **paraspinal** musculature at skin incision and at closure. In this group of patients, a saline-soaked fat graft was placed over the affected nerve root. Group 3 (10 patients) acted as a control group, undergoing lumbar microdiscectomy without corticosteroids or bupivacaine. Patients

receiving bupivacaine and corticosteroids (Group 1) had a statistically significantly shorter hospital stay (1.4 days) compared to the control group (4.0 days) (p = 0.0004, Mann-Whitney U-test). Patients in Group 1 required less postoperative narcotic analgesia than the other groups. Finally, a larger percentage of patients in Group 1 reported complete relief of back and radicular pain on postoperative Day 1 compared to other groups. Postoperative complications and functional outcome were not different between the groups. These results indicate that the combination of long-acting anesthetic agents and corticosteroids can reduce postoperative discomfort and subsequently the length of postoperative hospital stay.

L25 ANSWER 14 OF 36 BIOSIS COPYRIGHT 2001 BIOSIS
ACCESSION NUMBER: 1982:254658 BIOSIS
DOCUMENT NUMBER: BA74:27138
TITLE: MANAGEMENT OF LUMBAR NERVE ROOT PAIN BY INTRA THECAL AND EPIDURAL INJECTIONS OF DEPOT METHYL PREDNISOLONE ACETATE.
AUTHOR(S): RYAN M D; TAYLOR T K F
CORPORATE SOURCE: DEP. ORTHOPEDICS TRAUMATIC SURGERY, UNIV. SYDNEY ROYAL NORTH SHORE HOSP. SYDNEY, ST. LEONARDS, NSW 2065.
SOURCE: MED J AUST, (1981 (RECD 1982)) 68-2 (10), 532-534.
CODEN: MJAUAJ. ISSN: 0025-729X.
FILE SEGMENT: BA; OLD
LANGUAGE: English
AB Sciatica is 1 of the most incapacitating and difficult to treat of all benign pains. **Epidural** and **intrathecal** corticosteroids were used in depot form, **methylprednisolone** acetate (**Depo-Medrol**), in 108 patients who presented with a clinical diagnosis of acute lumbar disc prolapse and nerve-root pain. There was a 75% response rate in patients with less than 4 wk of symptoms, whereas in patients with more than 6 wk of symptoms the rate dropped to 43%. Patients with a high level of protein in their CSF appeared to have a higher response rate. The treatment is most likely to be effective when the patient is male, the duration of symptoms is less than 4 wk and the patient has irritant rather than compressive neuropathy.
IT Miscellaneous Descriptors
HUMAN **DEPO-MEDROL** ANALGESIC ANTIINFLAMMATORY
HORMONE-DRUG SCIATICA LUMBAR DISC PROLAPSE CEREBRO **SPINAL**
FLUID IRRITANT NEUROPATHY COMPRESSIVE NEUROPATHY PHARMACODYNAMICS

L25 ANSWER 15 OF 36 MEDLINE
ACCESSION NUMBER: 87065426 MEDLINE
DOCUMENT NUMBER: 87065426 PubMed ID: 3537827
TITLE: [Treatment of sciatica with injection of hydrocortisone into the sacral hiatus].
Leczenie rwy kulszowej wstrzykiwaniem hydrokortyzonu do rozworu krzyzowego.
AUTHOR: Matyjek J; Lubinski I
SOURCE: NEUROLOGIA I NEUROCHIRURGIA POLSKA, (1986 May-Jun) 20 (3) 218-21.
Journal code: NYF; 0101265. ISSN: 0028-3843.
PUB. COUNTRY: Poland
(CLINICAL TRIAL)
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Polish
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198701
ENTRY DATE: Entered STN: 19900302
Last Updated on STN: 19900302
Entered Medline: 19870116
AB A group of 305 patients was treated with injections of corticosteroids into the **epidural** space of the sacral canal through the sacral hiatus and recumbent position on hard surface. The injections were done every second day giving seven times hydrocortisone acetate 0.025 g and as the last injection **Depo-Medrol** 0.04 g (Upjohn) was administered. The control group comprised 324 cases treated by various other methods. The assessment of the results was based on two criteria: duration of hospital stay, and percent of patients referred for surgical treatment. In the control group the duration of hospital stay was 20 days, and 16.1% of patients were referred for surgical treatment. In the studied group these values were 17.5 days and 5.2%. Conclusion. In acute ischalgia administration of hydrocortisone and **depo-medrol** into the **epidural** space through the sacral hiatus and lying on hard

surface shorten the duration of strong pain and reduce the indications to surgical intervention.

L25 ANSWER 16 OF 36 MEDLINE
ACCESSION NUMBER: 92199612 MEDLINE
DOCUMENT NUMBER: 92199612 PubMed ID: 2134443
TITLE: Benefits of epidural methylprednisolone in a unilateral lumbar discectomy: a matched controlled study.
COMMENT: Comment in: J Spinal Disord. 1991 Sep;4(3):379
AUTHOR: Davis R; Emmons S E
CORPORATE SOURCE: Section of Neurosurgery, Kennebec Valley Medical Center, Augusta, Maine.
SOURCE: JOURNAL OF SPINAL DISORDERS, (1990 Dec) 3 (4) 299-306; discussion 307. Ref: 27
Journal code: BEQ; 8904842. ISSN: 0895-0385.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
General Review; (REVIEW)
(REVIEW, TUTORIAL)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199204
ENTRY DATE: Entered STN: 19920509
Last Updated on STN: 19920509
Entered Medline: 19920430

AB The effects of instilling **methylprednisolone** acetate (MP) (**Depo-Medrol**) onto the exposed nerve root during a unilateral lumbar laminotomy (either L4 or L5) for disc excision was studied in 43 patients (primary: 35, repeated procedure: 8). The results were compared with two similarly matched control groups without the steroid drug. All 86 patients preoperatively experienced radicular pain to the calf, and were operated on by one surgeon. Four parameters, studied during the postoperative hospital stay, were compared between the control and MP series. The MP (primary/repeat) groups' (a) stay was reduced by 37/40%, respectively; (b) need for strong narcotic drugs was decreased by 64/70%; (c) need for milder pain medication was decreased by 49/72%; and (d) need for spasm medication was reduced by 77/59%. The paired t test indicated that there is a statistical difference between the MP and control groups' results because of the use of MP, with confidence levels of 0.9927-0.9999 in the primary group, and 0.9806-0.9913 for three of the four parameters in the repeat group Intraoperative application of **epidural** steroid drugs such as MP, in a unilateral low-lumbar discectomy, leads to a shorter hospital stay because of less pain and spasm.

L25 ANSWER 17 OF 36 MEDLINE
ACCESSION NUMBER: 91295826 MEDLINE
DOCUMENT NUMBER: 91295826 PubMed ID: 1772484
TITLE: Depo-Medrol and myelographic arachnoiditis.
COMMENT: Comment in: Med J Aust. 1991 Sep 16;155(6):421-2
AUTHOR: Johnson A; Ryan M D; Roche J
CORPORATE SOURCE: Royal North Shore Hospital, St Leonards, NSW.
SOURCE: MEDICAL JOURNAL OF AUSTRALIA, (1991 Jul 1) 155 (1) 18-20.
Journal code: M26; 0400714. ISSN: 0025-729X.
PUB. COUNTRY: Australia
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199108
ENTRY DATE: Entered STN: 19910901
Last Updated on STN: 19910901
Entered Medline: 19910815

AB OBJECTIVE: This study was undertaken to see if patients who had a radiological diagnosis of arachnoiditis attributed to **methylprednisolone** acetate (**Depo-Medrol**, Upjohn Pty Limited) had the clinical syndrome of arachnoiditis. DESIGN: An attempt was made to review all patients, reported by Roche in 1984 with a radiological diagnosis of corticosteroid-induced arachnoiditis, by taking a detailed history and performing a physical examination. SETTING: The Department of Orthopaedics and Traumatic Surgery, The University of Sydney, The Royal North Shore Hospital, Sydney. RESULTS: Of the 18 patients reported by Roche 15 were located and participated in this study. The clinical syndrome of arachnoiditis was defined as a constant burning

pain in the back and legs, impotence, marked limitation of **spinal** motion, alteration of sensation and power in the legs, and a need for regular analgesia. Three of the 15 patients had the clinical syndrome of arachnoiditis. The grade of radiological change was unrelated to the severity of symptoms. The details of doses and precise sites of administration were unavailable for the severely affected individuals. CONCLUSIONS: The absence of any other apparent cause for their symptoms implies that **Depo-Medrol** should not be used in or about the thecal sac.

L25 ANSWER 18 OF 36 BIOSIS COPYRIGHT 2001 BIOSIS
ACCESSION NUMBER: 1982:159908 BIOSIS
DOCUMENT NUMBER: BA73:19892
TITLE: PRELIMINARY EVALUATION OF THE THERAPEUTIC VALUE OF DEPO-MEDROL ADMINISTERED EXTRADURALLY IN LUMBAR DISCOPATHY.
AUTHOR(S): GDAKOWICZ B
CORPORATE SOURCE: SZPITAL KW MO, JAGIELLONSKA 44, 70-382 SZCZECIN.
SOURCE: WIAD LEK, (1980 (RECD 1981)) 33 (20), 1617-1620.
CODEN: WILEAR. ISSN: 0043-5147.
FILE SEGMENT: BA; OLD
LANGUAGE: Polish
AB Therapeutic results were evaluated in 62 patients with lumbar discopathy treated by extradural injections of **depo-medrol**. One blockade was performed injecting 60 mg of the drug at the level of the damaged nerve root which was recogized by radiculography using metrizamide contrast medium. Disappearance of pain was evaluated as a very good result. This very good result was obtained in 31 cases, good in 15 and slight in 11 cases. No improvement was obtained in multilevel disc prolapse, in cases of pain after disc operation, or varices in the **spinal** canal. **Depo-medrol** acts most effectively and most rapidly against pain in cases of lumbar disc prolapse or bulging on condition that the drug is injected at the level and on the side of nerve-root compressed by the prolapsed disc.

L25 ANSWER 19 OF 36 MEDLINE
ACCESSION NUMBER: 92248262 MEDLINE
DOCUMENT NUMBER: 92248262 PubMed ID: 1533555
TITLE: **Intrathecal Depo-Medrol**: a literature review.
AUTHOR: Wilkinson H A
CORPORATE SOURCE: University of Massachusetts Medical Center, Worcester 01655.
SOURCE: CLINICAL JOURNAL OF PAIN, (1992 Mar) 8 (1) 49-56; discussion 57-8. Ref: 75
Journal code: BEG; 8507389. ISSN: 0749-8047.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
General Review; (REVIEW)
(REVIEW, TUTORIAL)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199206
ENTRY DATE: Entered STN: 19920619
Last Updated on STN: 19920619
Entered Medline: 19920610
AB Intrathecal methylprednisolone acetate (IT-MPA) treatments have been reported to be beneficial and safe for the treatment of low back problems and especially "failed back" problems, which include adhesive arachnoiditis. Other reports, however, have stressed the potential dangers of this treatment and have advised against its use. Many of these papers implicate the propylene glycol included in the methyl-prednisolone as being potentially harmful. Since the literature is rather extensive and clearly conflicting, it is difficult for those who treat patients with "failed back" problems to ascertain the risk/benefit ratio of this form of treatment, so a literature review and analysis has been undertaken. Published literature clearly attests to the usefulness and general safety of IT-MPA when used within certain limits. Although several studies implicate IT-MPA as a potential cause of arachnoiditis or other neurologic injury, most of the evidence is circumstantial and most complications followed multiple, large-dose, or frequent injections.
TI **Intrathecal Depo-Medrol**: a literature review.

L25 ANSWER 20 OF 36 MEDLINE
ACCESSION NUMBER: 85036000 MEDLINE
DOCUMENT NUMBER: 85036000 PubMed ID: 6238228
TITLE: **Epidural Depo-Medrol** revisited.
AUTHOR: Sekel R
SOURCE: MEDICAL JOURNAL OF AUSTRALIA, (1984 Nov 10) 141 (10) 688.
Journal code: M26; 0400714. ISSN: 0025-729X.
PUB. COUNTRY: Australia
Letter
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198412
ENTRY DATE: Entered STN: 19900320
Last Updated on STN: 19900320
Entered Medline: 19841210
TI **Epidural Depo-Medrol** revisited.

L25 ANSWER 21 OF 36 MEDLINE
ACCESSION NUMBER: 75138748 MEDLINE
DOCUMENT NUMBER: 75138748 PubMed ID: 1121415
TITLE: The experimental contusion injury of the spinal cord in sheep.
AUTHOR: Yeo J D; Payne W; Hinwood B; Kidman A D
SOURCE: PARAPLEGIA, (1975 Feb) 12 (4) 279-98.
Journal code: OQT; 2985038R. ISSN: 0031-1758.
PUB. COUNTRY: SCOTLAND: United Kingdom
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 197506
ENTRY DATE: Entered STN: 19900310
Last Updated on STN: 19900310
Entered Medline: 19750625
AB The validity of reproduction of the controlled contusion injury to the **spinal** cord in the experimental animal is questioned. The dynamic pathology involving the microvasculature within the first two hours is illustrated using light microscopy. After 15-30 minutes swelling of axons and disruption of myelin sheaths become evident in most areas of white matter. After four hours microcysts have formed in the columns of white matter and are evidence of irreversible damage. Swelling of the cord following injury results from congestion, extravasation and intracellular swelling of neurones, rather than from any demonstrable increase in extracellular fluid. Oedema was only demonstrated with perfusion fixation. Isotope and contrast myelography were compared in the identification of the degree and extent of **spinal** cord swelling. Significant improvement in motor power was found in a group of paraplegic sheep treated with alpha-methyl paratyrosine. There was no significant improvement in the degree of recovery of motor power or sensation in those animals treated with **intrathecal** methyl prednisolone (**Depo-Medrol**). The histopathology in the crushed **spinal** cord tissue of the treated and untreated animals at various intervals of time was compared. Some possible explanations for the different patterns of clinical recovery in the treated animals are discussed.

L25 ANSWER 22 OF 36 BIOSIS COPYRIGHT 2001 BIOSIS
ACCESSION NUMBER: 1996:353061 BIOSIS
DOCUMENT NUMBER: PREV199699075417
TITLE: The effect of chronic **epidural Depo-Medrol** on the hypothalamic-pituitary-adrenal axis.
AUTHOR(S): Mathieson, Angela L.; Intrater, Howard; Cruickshank, Lionel; Duke, P. C.; Ong, B. Y.; Woo, Vincent; Schimnowski, Donna; Trosky, Sharon; Dalton, Linda
CORPORATE SOURCE: Dep. Anesthesia, Univ. Manit., Health Sci. Cent., LB315, 60 Pearl Street, Winnipeg, MB R3E 1X2 Canada
SOURCE: Canadian Journal of Anaesthesia, (1996) Vol. 43, No. 5 PART 2, pp. A17.
Meeting Info.: Annual Meeting of the Canadian Anaesthetists' Society Montreal, Quebec, Canada June 14-18, 1996
ISSN: 0832-610X.
DOCUMENT TYPE: Conference

LANGUAGE: English
TI The effect of chronic **epidural Depo-Medrol** on the hypothalamic-pituitary-adrenal axis.

L25 ANSWER 23 OF 36 BIOSIS COPYRIGHT 2001 BIOSIS
ACCESSION NUMBER: 1990:8015 BIOSIS
DOCUMENT NUMBER: BA89:8015
TITLE: ANALYSIS OF EFFECTIVENESS OF THE TREATMENT OF SEVERE CASES OF ISCHIALGIA OF RADICULAR ORIGIN WITH **INTRATHECAL DEPO MEDROL** ADMINISTRATION.
AUTHOR(S): NIESYTY M; MOSKAL J
CORPORATE SOURCE: UL. WESOLA 12. 34-300 ZYWIEC.
SOURCE: WIAD LEK, (1988) 41 (23), 1575-1578.
CODEN: WILEAR. ISSN: 0043-5147.
FILE SEGMENT: BA; OLD
LANGUAGE: Polish
AB The analysis is presented of the therapeutic results in 30 patients of the neurology department of the Specialist Municipal Hospital Stalownik in Bielsko-Biala who were treated for severe sciatic pains of radicular origin caused by intervertebral sisc lesions. The patients received Depo-Medrol intrathecally, and the effects and improvement onset were evaluated in relation to previous therapeutic methods used in these patients. Depo-Medrol intrathecally is a very effective therapeutic method in sciatic pains of particular severity. The method shortened significantly the duration of treatment. No complications were observed.
TI ANALYSIS OF EFFECTIVENESS OF THE TREATMENT OF SEVERE CASES OF ISCHIALGIA OF RADICULAR ORIGIN WITH **INTRATHECAL DEPO MEDROL** ADMINISTRATION.

L25 ANSWER 24 OF 36 MEDLINE
ACCESSION NUMBER: 89348189 MEDLINE
DOCUMENT NUMBER: 89348189 PubMed ID: 2669351
TITLE: [Analysis of the effectiveness of treating severe cases of sciatica of radicular origin by **intrathecal** administration of **Depo-Medrol**].
Analiza skutecznosci leczenia ciezkich przypadkow rwy kulszowej korzeniowej dokanalowym podaniem Depo-Medrolu.
AUTHOR: Niesyty M; Moskal J
SOURCE: WIADOMOSCI LEKARSKIE, (1989 Dec 1) 41 (23) 1575-8.
Journal code: XOA; 9705467. ISSN: 0043-5147.
PUB. COUNTRY: Poland
(CLINICAL TRIAL)
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Polish
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198909
ENTRY DATE: Entered STN: 19900309
Last Updated on STN: 20000303
Entered Medline: 19890920
TI [Analysis of the effectiveness of treating severe cases of sciatica of radicular origin by **intrathecal** administration of **Depo-Medrol**].
Analiza skutecznosci leczenia ciezkich przypadkow rwy kulszowej korzeniowej dokanalowym podaniem Depo-Medrolu.

L25 ANSWER 25 OF 36 BIOSIS COPYRIGHT 2001 BIOSIS
ACCESSION NUMBER: 1987:204550 BIOSIS
DOCUMENT NUMBER: BR32:100927
TITLE: **EPIDURAL** MORPHINE AND **DEPO MEDROL** AN EFFECTIVE NONINVASIVE THERAPY FOR RECURRENT LOW BACK PAIN.
AUTHOR(S): COHN M L; HUNTINGTON C T; MACHADO A F; COHN M
CORPORATE SOURCE: PAIN TREATMENT CENTER, DEP. ANESTHESIOL., KING/DREW MED. CENTER, LOS ANGLES, CALIF. 90059, USA.
SOURCE: ANNUAL MEETING OF THE INTERNATIONAL SOCIETY FOR THE STUDY OF THE LUMBAR SPINE, DALLAS, TEXAS, USA, MAY 29-JUNE 2, 1986. ORTHOP TRANS, (1986 (RECD 1987)) 10 (3), 534.
CODEN: ORTTDM.
DOCUMENT TYPE: Conference
FILE SEGMENT: BR; OLD
LANGUAGE: English
TI **EPIDURAL** MORPHINE AND **DEPO MEDROL** AN EFFECTIVE NONINVASIVE THERAPY FOR RECURRENT LOW BACK PAIN.

L25 ANSWER 26 OF 36 MEDLINE
ACCESSION NUMBER: 94259986 MEDLINE
DOCUMENT NUMBER: 94259986 PubMed ID: 8201143
TITLE: Caudal epidural blocks for elderly patients with lumbar canal stenosis.
AUTHOR: Ciocon J O; Galindo-Ciocon D; Amaranath L; Galindo D
CORPORATE SOURCE: Department of Internal Medicine/Geriatrics, Cleveland Clinic Florida, Fort Lauderdale 33309-1743.
SOURCE: JOURNAL OF THE AMERICAN GERIATRICS SOCIETY, (1994 Jun) 42 (6) 593-6.
Journal code: H6V; 7503062. ISSN: 0002-8614.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199407
ENTRY DATE: Entered STN: 19940714
Last Updated on STN: 19940714
Entered Medline: 19940707

AB OBJECTIVE: To determine the efficacy of caudal **epidural** blocks (CEB) in relieving pain and the duration of pain relief with CEB in elderly patients suffering from degenerative lumbar canal stenosis (LCS). DESIGN: This study was a descriptive, prospective study with a 10-month follow-up. PARTICIPANTS AND SETTING: Thirty patients, 76 +/- 6.7 years of age, with leg discomfort with or without back pain and with LCS documented by magnetic resonance imaging (MRI) within 1 year of the study, were recruited from the outpatient clinic of the Cleveland Clinic Florida. None of the subjects had received CEB or surgery for their leg discomfort and none had relief of pain by analgesics alone. MEASUREMENTS AND INTERVENTIONS: Subjects received a total of three doses of 0.5% Xylocaine with 80 mg **Depo-Medrol** into the caudal **epidural** space through the sacral hiatus at weekly intervals. The Roland 5-point pain rating scale was utilized before and at 2-month intervals up to 10 months after the CEB was administered. MRI was used to identify the degree of LCS. RESULTS: The degree of LCS on admission was moderate in 66.7% (n = 20) of the patients, mild in 23.3% (n = 7), and severe in the remaining 10% (n = 3). Patients had LCS involving 2.4 +/- 0.49 lumbar vertebrae. The degree of LCS is directly correlated with the pain level before CEB. After CEB, the pain level changed from 3.43 +/- 0.82 to 1.5 +/- 0.86 ($P < 0.0000$), with a significant relief of pain up to 10 months (the end of observation). The duration of pain relief ranged from 4 to 10 months ($P < 0.0001$). CONCLUSION: CEB offers significant pain relief and appears to be a reasonable therapeutic option among elderly patients with LCS. This alternative seems particularly important among patients with poor response to drug therapy and who are either poor surgical risks or who have refused surgery.

L25 ANSWER 27 OF 36 MEDLINE
ACCESSION NUMBER: 77024758 MEDLINE
DOCUMENT NUMBER: 77024758 PubMed ID: 1234041
TITLE: Aseptic meningitis as a complication of scinticysternography utilizing 111Indium-dtpa.
AUTHOR: Forster G; Sacks S; Christoff N
SOURCE: CLINICAL NEUROLOGY AND NEUROSURGERY, (1975) 78 (4) 289-92.
Journal code: DF4; 7502039. ISSN: 0303-8467.
PUB. COUNTRY: Netherlands
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 197701
ENTRY DATE: Entered STN: 19900313
Last Updated on STN: 19990129
Entered Medline: 19770103

AB The **intrathecal** administration of numerous substances has been known to cause arachnoiditic as well as aseptic meningitic reactions. Pleocytosis and increased protein in the CSF are well known findings following administration of air or myelographic dyes. This has also been observed with antibiotics. Even **intrathecal** steroids (e.g. **depo-medrol**) have been implicated in aseptic meningitic reactions. Despite the wide variety of causative agents, only a small percentage of patients develop clinical manifestations of aseptic meningitis. Are these reactions then caused by specific auto-immune type

responses, or are they directly related to local irritants in each case, or a combination of both factors?

L25 ANSWER 28 OF 36 BIOSIS COPYRIGHT 2001 BIOSIS
ACCESSION NUMBER: 1983:159837 BIOSIS
DOCUMENT NUMBER: BA75:9837
TITLE: ACUPUNCTURE TREATMENT OF IATROGENIC CUSHINGS SYNDROME.
AUTHOR(S): CHEN G S
CORPORATE SOURCE: ACUPUNCTURE CENTER, 3245 LORNA ROAD, HOOVER, ALABAMA 35216.
SOURCE: AM J ACUPUNCT, (1982) 10 (2), 147-154.
CODEN: AJAPB9.
FILE SEGMENT: BA; OLD
LANGUAGE: English
AB A 45-year-old white female developed iatrogenic Cushing's syndrome after 5 lumbar **epidural** blocks with **Depo-Medrol** [methylprednisone acetate] for backache. Acupuncture treatments gave her complete relief of pain for the 1st time in 3 years. All the other side effects caused by nerve blocks, e.g., excessive perspiration, hand tremor, bed wetting and depression responded to the treatments favorably. The adrenal gland test showed 80% normal value, 8 days after the 1st treatment and adrenal gland function became normal after 9 treatments. A follow-up study for 5.5 yr showed that the back pain was almost completely gone and all functions were normal. The rapid relief of her pain and normalization of the plasma cortisone level may be the result of acupuncture-stimulated release of ACTH and .beta.-endorphin simultaneously from the pituitary gland.

L25 ANSWER 29 OF 36 MEDLINE
ACCESSION NUMBER: 92228108 MEDLINE
DOCUMENT NUMBER: 92228108 PubMed ID: 1808526
TITLE: [Epidural injections of steroids in the treatment of patients with chronic sciatica in discopathy]. Leczenie sterydowymi ostrzykniecami nadoponowymi chorych z przewlekla rwa kulszowa w przebiegu dyskopatii.
AUTHOR: Popiolek A; Domanik A; Mazurkiewicz G
CORPORATE SOURCE: Oddzialu Neurologii Wojewodzkiego Szpitala Specjalistycznego.
SOURCE: NEUROLOGIA I NEUROCHIRURGIA POLSKA, (1991 Sep-Oct) 25 (5) 640-6.
Journal code: NYF; 0101265. ISSN: 0028-3843.
PUB. COUNTRY: Poland
(CLINICAL TRIAL)
(CONTROLLED CLINICAL TRIAL)
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Polish
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199205
ENTRY DATE: Entered STN: 19920607
Last Updated on STN: 19970203
Entered Medline: 19920521
AB The authors tried to assess the effectiveness of the treatment with **epidural** steroid injections in cases with lumbar discopathy and chronic ischialgia++. Thirty patients were given one or two injections of **Depo-Medrol** or Polcortolon with added bupivacaine++ into the **epidural** space. The same number of patients were treated without such injections. Control examinations after 21 days showed greater and earlier improvement after **Depo-Medrol** . The results of Polcortolon were less evident. No side effects were observed.

L25 ANSWER 30 OF 36 BIOSIS COPYRIGHT 2001 BIOSIS
ACCESSION NUMBER: 1995:458655 BIOSIS
DOCUMENT NUMBER: PREV199598472955
TITLE: Treatment of primary and secondary fibromyalgia with local corticosteroids infiltrations.
AUTHOR(S): Samborski, Wlodzimierz; Kolczewska, Aleksandra; Lacki, Jan K.
CORPORATE SOURCE: Klin. Reumatol. Akad. Med., Poznanium Poland
SOURCE: Reumatologia (Warsaw), (1994) Vol. 32, No. 4, pp. 409-413.
ISSN: 0034-6233.
DOCUMENT TYPE: Article
LANGUAGE: Polish
SUMMARY LANGUAGE: Polish; English
AB Twenty five patients were divided into two group: 16 with primary and 9

with secondary fibromyalgia (7 with RA and 2 with ankylosing spondylitis). In all patients the local corticosteroids infiltrations with 2 times 20 mg **Depo-Medrol** + lignocaine in musculus **supraspinatus** regions were given. Before and 5 to 7 days after treatment the pain, stiffness, fatigue, vegetative and functional symptoms assessment with visual analogue scale as well as dolorimetry of 18 ACR tender points were performed. In patients with primary and secondary fibromyalgia statistic significant improvement in pain, stiffness and sleep disturbances was observed. Moreover the patients have less complaints in fatigue and other vegetative and functional symptoms. Before and after therapy there were no significant improvement in results of dolorimetric measurements in both groups. This study confirms our impression that corticosteroids can be effective therapy in fibromyalgia.

L25 ANSWER 31 OF 36 MEDLINE
ACCESSION NUMBER: 97067498 MEDLINE
DOCUMENT NUMBER: 97067498 PubMed ID: 8965975
TITLE: [Continuous epidural blockade as a method of treatment of low back pain syndrome in the course of disk pathology. Introductory research].
Ciagla zewnatrzoponowa blokada przeciwbolowa jako metoda leczenia bolu ledzwiowo-krzyzowego w przebiegu dyskopatii. Doniesienie wstepne.
AUTHOR: Wolny T; Ligaj H; Czarnacki J
CORPORATE SOURCE: Oddzialu Neurologii Szpitala MSW w Lublinie.
SOURCE: NEUROLOGIA I NEUROCHIRURGIA POLSKA, (1996 May-Jun) 30 (3) 409-18.
Journal code: NYF; 0101265. ISSN: 0028-3843.
PUB. COUNTRY: Poland
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Polish
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199612
ENTRY DATE: Entered STN: 19970128
Last Updated on STN: 19970128
Entered Medline: 19961224

AB The purpose of this study is to present several years experiences in using of **epidural** analgetic blockade in patients with a substantial exacerbation of radicular pain syndrome in the course of discopathy resistant to traditional treatment. The observation of 61 non-surgical patients, who were given **epidurally** an analgetic (Bupivacainum hydrochloricum or Morphinum hydrochloricum) and a steroid antiphlogistic (**Depo-Medrol**) simultaneously, using a stationary catheter, confirms the efficacy of the method. Taking advantages of local analgesia in order to break the pain arc, the possibility of sustaining it for an extended period of time, as well as its local antiphlogistic activity, even while using minimal doses of the drugs, show evident therapeutic effects.

L25 ANSWER 32 OF 36 MEDLINE
ACCESSION NUMBER: 88045955 MEDLINE
DOCUMENT NUMBER: 88045955 PubMed ID: 2960132
TITLE: Epidural application of cortico-steroids in low-back pain and sciatica.
AUTHOR: Andersen K H; Mosdal C
CORPORATE SOURCE: University Clinic of Neurosurgery, Rigshospitalet, Copenhagen, Denmark.
SOURCE: ACTA NEUROCHIRURGICA, (1987) 87 (1-2) 52-3.
Journal code: 19C; 0151000. ISSN: 0001-6268.
PUB. COUNTRY: Austria
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198711
ENTRY DATE: Entered STN: 19900305
Last Updated on STN: 19900305
Entered Medline: 19871123

AB Seven women and nine men, aged 27-59 years (mean 45), with lumbar pain and sciatica had **epidural** blocks once with 80 mg of **depo-medrol** and lidocaine in individual doses. All had static and kinetic lumbar pain up to 16 years and all but four also pain radiating to the lower limbs. Radiculography was "negative" in all patients, but three exhibited minor neurological abnormalities. Five patients had had a lumbar

hemilaminectomy previously. In case of segmental pain in the lower limbs the appropriate level was used, in all other patients injection was done in L3-4 interspace. By means of a visual analogous scale 10 patients (62%) stated relief of half the pain the following day. One month later only 7 patients (43%) stated relief of one third of the pain. Only one patient benefited ultimately (after 6 months). In the remainder complaints were unaffected by the **epidural** injection. These discouraging results are not compatible with other reports, and a planned double-blind randomized investigation was abandoned. For the present category of patients (long-lasting complaints, previous "disc" operations) we found the **epidural** steroid injection useless.

L25 ANSWER 33 OF 36 MEDLINE
ACCESSION NUMBER: 96371100 MEDLINE
DOCUMENT NUMBER: 96371100 PubMed ID: 8774935
TITLE: Painless lumbar surgery: morphine nerve paste.
AUTHOR: Needham C W
CORPORATE SOURCE: Neurosurgery, Yale University College of Medicine, New Haven, USA.
SOURCE: CONNECTICUT MEDICINE, (1996 Mar) 60 (3) 141-3.
Journal code: DQF; 0372745. ISSN: 0010-6178.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199612
ENTRY DATE: Entered STN: 19970128
Last Updated on STN: 19970128
Entered Medline: 19961206

AB The intraoperative application of morphine as a nerve paste to the exposed dura and nerve roots in lumbar cases provides immediate, dramatic, and long-term relief in postoperative pain. Fifty-four patients with intractable sciatica due to ruptured discs or lumbar stenosis were treated. After decompression of the involved nerve root(s), a paste composed of Avitene, **Depo-medrol**, Amicar, and Duramorph is applied to the local **epidural** space. No catheter is required. The Duramorph does not need to be replenished. The use of the nerve paste reduces hospital stay to a minimum, reduces the stress of surgery, and has not produced undesirable side-effects.

L25 ANSWER 34 OF 36 CAPLUS COPYRIGHT 2001 ACS
ACCESSION NUMBER: 1990:152059 CAPLUS
DOCUMENT NUMBER: 112:152059
TITLE: Methylprednisolone acetate does not cause inflammatory changes in the epidural space
AUTHOR(S): Cicala, Roger S.; Turner, Robert; Moran, Edward; Henley, Russell; Wong, Richard; Evans, James
CORPORATE SOURCE: Dep. Anesthesiol., Univ. Tennessee, Memphis, TN, 38163, USA
SOURCE: Anesthesiology (1990), 72(3), 556-8
CODEN: ANESAV; ISSN: 0003-3022
DOCUMENT TYPE: Journal
LANGUAGE: English

AB To examine the possible adverse effects that epidural injection of depot corticosteroid prepns. may have on meningeal membranes and nervous tissue, healthy adult white rabbits received 0.3 mL/kg epidural injections of either lactated Ringer's soln. (neg. control group), 1% lidocaine contg. methylprednisolone acetate (study group), or normal saline contg. talc (pos. control group). Animals were killed either 4 or 10 days after injection and stained sections of the spinal cord and meningeal membranes were examd. by light microscopy. In all animals that received either lactated Ringer's soln. or lidocaine with methylprednisolone acetate, microscopic examn. of specimens taken from the L5-L6 interspace revealed no white cell infiltrates and no fibroblastic activity. All animals that recived epidural injections of normal saline contg. talc had marked infiltration of tissue macrophages in the epidural space. There was no thickening of the meningeal membranes or nerve roots in any animal. The complete lack of inflammatory changes and meningeal thickening demonstrated in this study helps to confirm the safety of methylprednisolone acetate when injected into the epidural space.

IT 53-36-1, **Depo-Medrol**
RL: BIOL (Biological study)
(inflammation from **epidural** injection of)

L25 ANSWER 35 OF 36 BIOSIS COPYRIGHT 2001 BIOSIS
ACCESSION NUMBER: 1985:5267 BIOSIS
DOCUMENT NUMBER: BR28:5267
TITLE: MODEST REDUCTION OF OLIGOCLONAL BANDING IN MULTIPLE SCLEROSIS WITH ACTH AND CORTICOSTEROIDS.
AUTHOR(S): BAUMBEFNER R W; STAUGAITIS S M; TOURTELLOTTE W W; SHAPSHAK P; CHUANG E
CORPORATE SOURCE: LOS ANGELES, CALIF.
SOURCE: 109TH ANNUAL MEETING OF THE AMERICAN NEUROLOGICAL ASSOCIATION, BALTIMORE, MD., USA, OCT. 7-10, 1984. ANN NEUROL, (1984) 16 (1), 142.
CODEN: ANNED3. ISSN: 0364-5134.
DOCUMENT TYPE: Conference
FILE SEGMENT: BR; OLD
LANGUAGE: English
IT Miscellaneous Descriptors
ABSTRACT HUMAN BLOOD-BRAIN BARRIER **CEREBROSPINAL** FLUID SERUM PREDNISONE SOLUMEDROL **DEPO MEDROL** DEXAMETHASONE HYDROCORTISONE HORMONE-DRUG ANTIINFLAMMATORY-DRUG IMMUNOGLOBULIN G CENTRAL NERVOUS SYSTEM INFLAMMATION

L25 ANSWER 36 OF 36 BIOSIS COPYRIGHT 2001 BIOSIS
ACCESSION NUMBER: 1981:62579 BIOSIS
DOCUMENT NUMBER: BR20:62579
TITLE: INTRA SPINAL STEROID THERAPY.
AUTHOR(S): BERNAT J L
CORPORATE SOURCE: DIV. NEUROL., DEP. MED., DARTMOUTH MED. SCH., HANOVER, NH 03755.
SOURCE: Neurology, (1981) 31 (2), 168-171.
CODEN: NEURAI. ISSN: 0028-3878.
FILE SEGMENT: BR; OLD
LANGUAGE: English
IT Miscellaneous Descriptors
REVIEW HUMAN DOG SUBARACHNOID SPACE **EPIDURAL** SPACE **DEPO-MEDROL** HORMONE-DRUG COMPLICATION LUMBAR RADICULOPATHY HERNIATED DISC ARACHNOIDITIS HEAD ACHE MULTIPLE SCLEROSIS

ACCESSION NUMBER: 93163885 MEDLINE
DOCUMENT NUMBER: 93163885 PubMed ID: 8433138
TITLE: The perioperative use of corticosteroids and bupivacaine in the management of lumbar disc disease.
AUTHOR: Glasser R S; Knego R S; Delashaw J B; Fessler R G
CORPORATE SOURCE: Department of Neurosurgery, University of Florida, Gainesville.
SOURCE: JOURNAL OF NEUROSURGERY, (1993 Mar) 78 (3) 383-7.
Journal code: JD3; 0253357. ISSN: 0022-3085.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals
ENTRY MONTH: 199303
ENTRY DATE: Entered STN: 19930402
Last Updated on STN: 19930402
Entered Medline: 19930317

AB The introduction of microdiscectomy to lumbar **spine** surgery has resulted in a significant decrease in postoperative pain and length of hospital stay. Intraoperative application of long-acting local anesthetic agents has been used for many general and neurosurgical procedures for the management of postoperative pain. In addition, many surgeons routinely use intraoperative corticosteroids during lumbar discectomy to reduce traumatic nerve root inflammation. However, the efficacy of intraoperative long-acting local anesthetic agents and corticosteroids for reduction of postoperative discomfort has not been reported for lumbar discectomy. This study evaluated 32 patients at a university-based Veterans Administration hospital undergoing lumbar microdiscectomy. All 32 patients presented with radicular symptoms and had radiographic confirmation of a herniated nucleus pulposus. These patients were divided into three groups. Group 1 (12 patients) received 160 mg intramuscular **Depo-Medrol** (**methylprednisolone** acetate) and 250 mg intravenous Solu-Medrol (methyl-prednisolone sodium succinate) at the start of the operation. A macerated fat graft soaked in 80 mg **Depo-Medrol** was placed over the affected nerve root following discectomy. In addition, 30 ml of 0.25% bupivacaine was infiltrated into the **paraspinal** musculature at skin incision and during closure. Group 2 (10 patients) received 30 ml of 0.25% bupivacaine infiltrated into the **paraspinal** musculature at skin incision and at closure. In this group of patients, a saline-soaked fat graft was placed over the affected nerve root. Group 3 (10 patients) acted as a control group, undergoing lumbar microdiscectomy without corticosteroids or bupivacaine. Patients receiving bupivacaine and corticosteroids (Group 1) had a statistically significantly shorter hospital stay (1.4 days) compared to the control group (4.0 days) ($p = 0.0004$, Mann-Whitney U-test). Patients in Group 1 required less postoperative narcotic analgesia than the other groups. Finally, a larger percentage of patients in Group 1 reported complete relief of back and radicular pain on postoperative Day 1 compared to other groups. Postoperative complications and functional outcome were not different between the groups. These results indicate that the combination of long-acting anesthetic agents and corticosteroids can reduce postoperative discomfort and subsequently the length of postoperative hospital stay.